



**Registration Form  
Season 2022- 2023**

**Contact Information**

Name: \_\_\_\_\_

School Grade: \_\_\_\_\_ Birthday (mm/dd/yyyy): \_\_\_\_\_

Name of Mother: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of Father: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Emergency Information**

Current Medications: \_\_\_\_\_ Known Allergies: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Medical Emergencies: \_\_\_\_\_ I Consent \_\_\_\_\_ I Do Not Consent

To Whom It May Concern: If, in the professional judgement of a qualified doctor or other professional(s) of an emergency treatment facility, medical assistance or treatment is required during the Escuela Cubana de Ballet school year, my submission of this form authorizes such treatment/assistance.

### Card Information

This section is for the card you want to use for the automatic monthly payments on the 1<sup>st</sup> of each month.

Cardholder's Name: \_\_\_\_\_ Type of Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp mm/yy: \_\_\_\_\_

Security Code: \_\_\_\_\_ Billing Address: \_\_\_\_\_

Card Agreement: \_\_\_\_\_ I Consent

This signed registration form which enrolls your child in the Escuela Cubana de Ballet, is a contract for a period of 11 months. Tuition is based on the school year, August through June with 11 automatic monthly payments. Installment payments to be paid on the 1st of each month automatically. No bills are sent monthly. The non-refundable installment tuition is the same amount for each month, no matter the number of class days in the month. Escuela Cubana de Ballet does not prorate for missed days. A non-refundable \$50 registration fee applies to all new students. Tuition must be paid by credit/debit card automatically and is due the 1st of every month. If for any reason, you request to break this contract, Escuela Cubana de Ballet reserves the right to hold the last month tuition payment which is paid at the time of registration.

**List of Fees:** \_\_\_\_\_ I have read and understood the below

Registration fee: \$50

Audition fee: \$25

Late payment fee: \$25 (applicable after the 5th, if payment is not made)

### Disciplines:

Classical Ballet

Latin Dances

### Tuitions fees:

Ballet:	Latin Dances:	Packages:
<input type="checkbox"/> 1.5 hours/week \$125.00	<input type="checkbox"/> 1 hour/week \$90.00	<input type="checkbox"/> 2.5 hours/week \$175.00
<input type="checkbox"/> 2 hours/week \$155.00	<input type="checkbox"/> 1.5 hours/week \$120.00	<input type="checkbox"/> 3 hours/week \$200.00
<input type="checkbox"/> 3 hours/week \$195.00		<input type="checkbox"/> 4 hours/week \$240.00
<input type="checkbox"/> Private Class \$80.00		<input type="checkbox"/> 4.5 hours/week \$260.00

**School Policies:** \_\_\_\_\_ I have read and understood the below

Parents, students, and their families are required to read and follow all Escuela Cubana de Ballet policies found at [www.escuballet.com](http://www.escuballet.com)

**COVID-19:** \_\_\_\_\_ I have read and understood the below

If I or anyone in my household has encounter someone with COVID-19 or have symptoms of COVID-19 agree to stay at home until symptoms disappear.

**Release of Claims and Treatment Authorization:**

I have read and understood the below I am aware that Ballet, Salsa (dance in general) and fitness exercises associated with it, place an unusual stress on the body and a risk of physical injury. I assume the risk and agree that the Escuela Cubana de Ballet will ensure the safety of the children during class hours and when in the school but shall not be held liable in any way for injuries sustained during attendance at the Escuela Cubana de Ballet or any related Escuela Cubana de Ballet functions.

Escuela Cubana de Ballet are not responsible for any student or parent/guardian on the property prior to, between or after classes and/or rehearsals. Escuela Cubana de Ballet are not responsible for any students and/or parent/guardians' personal property or belongings or vehicle (and personal property there-in) at the school, theatres, or any related function venue (lost, stolen, or damaged). I am also aware that the tuition fees and list offer continues the same unless the cancellation of the contract is exercised. I hereby release and discharge Escuela Cubana de Ballet, its agents, employees, and officers from all claims, damages, actions, judgments, and executions, which the undersigned, heirs, and executors, may claim to have against Escuela Cubana de Ballet or its successor, for all injuries caused by the above-described activities, any activities related thereto and/or failure to follow school policies, regulations, or rules.

Further, I grant the Escuela Cubana de Ballet it's agents and employees to authorize emergency treatment that may be required.

I, the undersigned, have read this form entirely and agree to all the information concerning Tuition, fees, release of Claims and treatment authorization information, medical information, emergency contact information, school's policy and regulations, card information. I completely understand all their terms. I execute this voluntarily and with full acknowledgement of its significance and consequences.

\_\_\_\_\_ I agree to the automatic tuition payment plan, my card will be charged automatically.

Signature of Legal Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_