



## 2021-2022 Registration Form

### Student

Name \_\_\_\_\_ Nickname \_\_\_\_\_

Birthdate \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

### Parent/Guardian

Name(s) \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email(s) \_\_\_\_\_

### Address

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Emergency Contact

Name \_\_\_\_\_ Phone \_\_\_\_\_

### Select your classes:

<b>Creative Movement</b> <input type="checkbox"/> Monday 10:00-10:45am <input type="checkbox"/> Tuesday 10:00-10:45am <input type="checkbox"/> Wednesday 10:00-10:45am <input type="checkbox"/> Saturday 10:00-10:45am  <b>Pre-Ballet</b> <input type="checkbox"/> Monday 11:00-11:45am <input type="checkbox"/> Tuesday 11:00-11:45am <input type="checkbox"/> Thursday 4:30-5:15pm <input type="checkbox"/> Saturday 9:00-9:45am  <b>Ballet 1</b> <input type="checkbox"/> Monday 12:00-1:00pm <input type="checkbox"/> Tuesday 4:30-5:30pm <input type="checkbox"/> Wednesday 5:30-6:30pm  <b>Ballet 2</b> <input type="checkbox"/> Tuesday 5:30-6:30pm <input type="checkbox"/> Wednesday 4:30-5:30pm  <b>Ballet 3</b> <input type="checkbox"/> Tuesday 6:30-7:30pm <input type="checkbox"/> Thursday 5:30-6:30pm	<b>Ballet 4</b> <input type="checkbox"/> Monday 4:00-5:30pm <input type="checkbox"/> Tuesday 7:30-8:30pm  <b>Ballet 5</b> <input type="checkbox"/> Monday 5:30-7:00pm <input type="checkbox"/> Wednesday 6:30-8:00pm  <b>Ballet 6/7</b> <input type="checkbox"/> Monday 5:30-7:00pm <input type="checkbox"/> Tuesday 6:30-7:30pm <input type="checkbox"/> Friday 4:45-6:15pm  <b>Pointe</b> <input type="checkbox"/> Pre-Pointe: Friday 3:45-4:45pm <input type="checkbox"/> Pointe 1: Monday 7:00-8:00pm <input type="checkbox"/> Pointe 2: Monday 7:00-8:30pm  <b>Electives</b> <input type="checkbox"/> Progressive Ballet Training: Tuesday 5:30-6:30pm <input type="checkbox"/> Stretch and Strengthen: Friday 4:45-5:45pm <input type="checkbox"/> Variations: Tuesday 7:30-8:30pm	<b>Modern</b> <input type="checkbox"/> Beginning: Tuesday 4:30-5:30pm <input type="checkbox"/> Intermediate: Wednesday 6:30-7:30pm <input type="checkbox"/> Intermediate/Advanced: Monday 4:00-5:30pm  <b>Classical Jazz</b> <input type="checkbox"/> Beginning: Wednesday 4:30-5:30pm <input type="checkbox"/> Intermediate: Wednesday 5:30-6:30pm <input type="checkbox"/> Intermediate/Advanced: Thursday 6:30-8:00pm  <b>Tap</b> <input type="checkbox"/> Beginning: Thursday 5:30-6:30pm <input type="checkbox"/> Intermediate: Thursday 6:30-7:30pm <input type="checkbox"/> Intermediate/Advanced: Thursday 4:30-5:30pm  <b>Total class hours</b> _____
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# TCBT 2021-2022 Tuition

Please read the information below and complete the bottom portion based on your preferred payment plan. Our tuition is calculated by season. Each season is 34 weeks.

## Payments

- We offer annual, bi-annual, quarterly, and monthly payment options.
- **All payments require auto draft** to a checking account or credit card and will be set up in our Parent Portal.
- Annual payment discount is 10% and is **due 7/15**
- Bi-annual payment discount is 5% and are **due 7/15 and 1/15**
- Quarterly payments are due **7/15, 10/15, 1/15, 3/15**

## Discounts

- Sibling discount is 20% off lesser tuition
- Male dancers discount is 50% off tuition
- Active Military discount is 10% off tuition (ID required)

## Tuition Schedule

Total Class Hours (round up)	Annual Payment Option (-10%)	Bi-annual Payment Option (-5%)	Quarterly Payment Option	Monthly Payment Option (auto draft)
45 mins	550	275	127.50	55
1	600	300	150	60
2	900	450	225	90
3	1100	550	275	110
4	1300	650	325	130
5	1500	750	375	150
6	1600	800	400	160
7	1700	850	425	170
8 or more	1800	900	450	180

**\*If in between class hour totals, round up to the next hour.**

## Registration fees (non-refundable)

- New students: \$25.00
- Returning students: \$10.00
- Siblings: \$5.00

Total class hours: \_\_\_\_\_

Registration fee: \_\_\_\_\_

**Tuition payment amount:**

Circle any discounts:  
sibling, male dancer, military

Circle payment choice:  
annual, bi-annual, quarterly, or monthly

\_\_\_\_\_



## Waiver and Release 2021-2022 Season

PLEASE COMPLETE FULLY AND PRINT CLEARLY

### Participation and Media

In consideration of \_\_\_\_\_ (participant name) being permitted to participate in classes, workshops, off site events or performances, by signing below, I release The Children's Ballet Theatre, LLC. from any and all liability for any and all loss and damage, on account of any injury or loss suffered by the participant. I expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Tennessee, and that if any portion is held invalid, that the balance shall continue in full legal effect. I give permission for the use of my child's image (my image) in all media and advertising used by The Children's Ballet Theatre, LLC.

### Medical Information

If student has a medical condition that needs special attention, it would be proper to have a conference with Mrs. Chelsea Howell prior to attending classes or rehearsals with The Children's Ballet Theatre, LLC.

Are there any medical conditions the faculty or staff need to be aware of?

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### Medical Authorization:

Permission is hereby granted to transport above named participant to a doctor or hospital in case of emergency due to illness or injury when unable to locate parent/guardian.

Name of Physician: \_\_\_\_\_

Insurance Policy and Number: \_\_\_\_\_

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

\_\_\_\_\_  
Date: \_\_\_\_\_

**Signature (of parent/guardian if student is under 18 years of age)**