



2024-2025 Registration Form

Student

Name: _____ Age: _____

Birthdate: ___/___/___ School: _____ Grade: _____

Phone: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Allergies and/or Medical Conditions? _____

Parent(s)/Guardian

Parent/Guardian Name (*Primary*): _____ Phone: _____

Email: _____ *Will be opted in for texts and emails.

Parent/Guardian Name (*Secondary*): _____ Phone: _____

Email: _____ Text Opt In: Y/N Email Opt In: Y/N

Emergency Contact(s)

Contact 1 Name: _____ Phone: _____

Contact 2 Name: _____ Phone: _____

2024-2025 Tuition

Payments

Our tuition is calculated by season. Each season is 34 weeks. We offer annual, bi-annual, and monthly payment options to cover the 34 weeks.

- **Annual** payment discount is 10% and payment is **due by 7/15**
- **Bi-Annual** payment discount is 5% and payments are **due 7/15 and 1/15**
- ***Monthly** payments require a checking account or credit card on file to be drafted on the 15th of the month (Aug-May). Your first month's payment is due at registration.

**Monthly payment option splits your annual tuition amount into 10 monthly payments. We draft each month consecutively. Due to our Nutcracker performance, we do not dance a whole month in December. Payment will be drafted on 12/15 as we pull each month's payment to account for the 34 week season.*

Tuition Schedule

Total Class Hours (*round up)	Annual Payment Option (-10%)	Bi-Annual Payment Option (-5%)	Monthly Payment Option (auto draft)
45 Min	650	325	65
1	750	375	75
1.5	1300	650	130
2	1400	700	140
3	1600	800	160
4	2000	1000	200
5	2300	1150	230
6	2800	1400	280
7	3000	1500	300
Unlimited	3300	1650	330

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

Discounts

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

Registration Fees (non-refundable)

- New Students: \$35.00
- Returning Students: \$20.00
- Families: \$40.00

Please complete the below portion based on your preferred payment plan and discount options.

Payment Plan: <i>(circle one)</i>			
Annual	Bi-annual	Monthly	
Discounts: <i>(circle if applicable)</i>			
Sibling	Male Dancer	Military	Company
Total Class Hours: _____ Registration Fee: _____ Tuition Payment Amt: _____			
To be completed by office staff: Amount Paid: _____ Date: _____			

Waiver & Release 2024-2025 Season

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 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.

Parent/Guardian Signature

Date