

ACADEMIC YEAR 2018/19 REGISTRATION FORM

NAME OF STUDENT _____ STUDENT'S AGE _____ BIRTH DATE ____/____/____

Required only for new students unless information has changed.

ADDRESS _____ HOME PHONE _____

CITY _____ STATE _____ ZIP _____

PARENT/GUARDIAN: MR/MS/MRS/DR _____ CELL _____

PARENT/GUARDIAN: MR/MS/MRS/DR _____ CELL _____

PARENT/GUARDIAN EMAIL(S) _____

(Please note the majority of correspondence will be sent via email)

STUDENT'S SCHOOL _____ GRADE (as of 9/18) _____ STUDENT'S EMAIL _____

CLASS REGISTRATION: Full Year or Semester or Adult

CLASS _____ DAY(S)/TIME _____ LOCATION _____ TUITION _____

CLASS _____ DAY(S)/TIME _____ LOCATION _____ TUITION _____

Due to limited class sizes, I, the undersigned, understand this contract to be binding for the full Academic Year (9/2018 - 6/2019) or full semester, whichever I have registered for above. I understand that once my child is registered, I commit to paying the full year's tuition or full Semester tuition, as per above. I understand that I will not receive the full-year discounted class rates with a commitment to only a semester. Tuition is not refundable. MBT reserves the right to cancel under-enrolled classes. By enrolling at MBT, I certify I have read and agree to comply with MBT's Code of Conduct and all posted rules, and I give permission for photos and/or video likeness of my child to be used in publications, press releases, video productions and website pages made by and for MBT. As Consideration for being allowed to enter the studios and/or participate in any program or activity at or with Metropolitan Ballet Theatre (MBT), the undersigned, on his or her behalf, and on the behalf of the Participant(s) identified above, acknowledges, appreciates, understands, and agrees to MBT's Liability Waiver, found on MBT's website and available in print from the office.

Ballet and other forms of dance are physical in nature and participant and parent assume all risks and liabilities associated therewith. Participant and responsible parent/guardian agree to hold MBT, related faculty, staff and Board of Directors, harmless from all liability. Parents authorize MBT to administer first aid if necessary, and parents will be informed as promptly as possible by MBT if injury or illness occurs. If not paying tuition in full at registration, I agree to the tuition and payment plan policies as described below and agree to keep current credit/debit card information on file with MBT at all times to manage this payment plan. I agree that MBT is authorized to charge this account for the tuition payment due as described on the first day of each month.

Parent/Guardian Signature _____ Date ____/____/____

Please select an MBT Family Directory preference (circle one): **Opt-in** or **Opt-out**

Mobile Alerts for weather closings and other important events (circle one): **Opt-in** or **Opt-out**

How Did You Hear About Us? _____

Which of MBT's volunteer committees would you be interested in?

- Events Fundraising Costumes/Productions Gala Facilities/Crew

TUITION AND PAYMENT PLAN: Tuition and Fees: A \$35 non-refundable annual registration fee per student is due with registration. Tuition for full-year classes or semester classes is payable in full at registration or may be payable in installments through an automated payment plan. Payment plans must be automated with a credit/debit card kept on file at MBT. Payment plans for the 2018/2019 Academic Year must be fulfilled by November 1 (Semester 1) or March 1 (Full-year or Semester 2), unless otherwise permitted in writing by an authorized member of MBT's staff on the payment plan authorization form. Tuition paid in full by check or cash only prior to August 15 will be given a 2% discount on tuition. A \$25 late fee is assessed for payment after due date due to expired/declined account information. It is your responsibility to notify the office with any changes to your payment method. Semester classes are discounted only with commitment to a full year. Tuition is pro-rated for mid-year enrollments. All tuition is non-refundable. Special price options for additional classes outside of initial program are to be used by same student; siblings may not "share" that offer. For some classes, placement by an MBT faculty member will be required as noted. For all classes not requiring a faculty placement, students are placed based on their age as of September 1, 2018. Please call 301-762-1757 to schedule a placement class, trial class, or to make an appointment to visit our studios.

To be completed by MBT staff only.

Total Tuition due for 2018/20189Academic Year: \$ _____ + \$35 registration fee = \$ _____

- Check enclosed payable to MBT in the amount of: \$ _____ (\$25 Returned check fee)
 Charge my credit card today for the full amount due
 I will establish the payment plan outlined below

Deposit to be charged today: (min 30%): \$ _____ + \$35 registration fee = \$ _____ TOTAL DATE: _____

Payments:

Equal payments of \$ _____ will be charged to your credit/debit on file the 1st of each month _____ through _____.

Payment Plans must be established with a Credit/Debit Card, to be kept on file at MBT.

Name on Card: _____ Exp. Date: ____/____/____

Visa/Mastercard/Discover Card Number: _____ Security code: _____