Charlotte School of Ballet 627 South Sharon Amity Road Charlotte, NC 28211 704-366-9675

Enrollment Date:

2021 -2022 EnrollmentPlease Print Clearly

Student's Name			
			Academic Grade for 2021-22
Parent/Guardian	1		
Address			
			Zip Code
			ss Phone
			Cell
			s the best contact number?
Classes Enrolled			
3			
4			
5			
6			
Total # of classe	es per week	(Reminder: Cla	asses 75 minutes or longer are billed as 2 classes)
Registration fee	\$55.00 per student (due	upon registration)	
Annual Tuition P ((Payment Options: Please :) one annual payment o) two semester paymen) 10 payments (paymer April.	lue by 8/31 ts due 8/31 & 1/20	ent $2-9$ due by the 20^{th} of each month, September –
		for the Annual Tuition Cost. Thew the Tuition Table in the han	ne payment options are to serve our families and are dbook for pricing.
I have completed	d the Statement of Agree	ment on the reverse side of th	is form

Charlotte School of Ballet Statement of Agreement

Please read and initial each item:

1.	TUITION: I understand that I am enrolling for the 2019- 2020 dance year and that I am responsible for all tuition payments as registered until a Registration Change Form is submitted 30 days prior to date of change.
2.	CLASS PLACEMENT: I understand that class placement is at the discretion of the teachers. Starting at RAD Grade 1, CSB recommends taking classes two times per week. By RAD Grade 3, CSB encourages dancers to add modern and/or jazz to their training. <u>In order to be eligible to take RAD examinations, the MINIMUM requirement is to take 2 classes per week over one year or take 1 class per week for two years. Some dancers may require more time at each level to be prepared for a successful examination. Dance training takes careful repetition over time and teachers invite students to exams when they are ready.</u>
3.	FIRST AID/EMERGENCY TREATMENT: Although every effort is made to create a safe environment, I realize there is always a risk of accident. If necessary, I authorize the Charlotte School of Ballet to administer first aid treatment and or emergency treatment for my child on my behalf. I further release the Charlotte School of Ballet from liabilities for injury or damages arising out of personal injury of any kind.
4.	PERMISSION TO USE DANCER'S LIKENESS: Charlotte School of Ballet is granted permission to use dancer's likeness in advertisements, news releases and on website.
5.	NOTIFICATION OF Covid-19: I agree to not bring my dancer into the studio if I can answer "yes" to any of the following questions: I. Have you or your dancer had close contact in the last 14 days with someone diagnosed with Covid-19, or have you been advised to quarantine? II. Do you or your dancer have any of these symptoms? □ Fever □ Chills □ Shortness of breath or difficulty breathing □ New cough □ New loss of taste or smell. III. Have you or your dancer been diagnosed with an active case of COVID-19?
6.	ONLINE CLASS POLICY: I understand that if it should become necessary to close the studio due to a state-wide health concern (such as Covid-19), classes will switch to online classes, such as Zoom. I understand that annual tuition includes both in-studio and online classes. I further understand that a Registration Change Form is required to drop online classes and that it may be submitted electronically. I understand the 30-day drop policy will be waived for the first 14 days from the first online class and after the 14-day grace period, all registration change forms will include the 30-day drop policy. I understand that the 14-day grace applies only to new online classes created in the case of a state mandated in studio closure.
7.	HANDBOOK: I have read the CSB Handbook and agree to abide by the policies therein and listed above.
I/We have read ar	nd understand the above policies.
Parent/Guardian/F	Responsible Party Signature Date