

Ballet School NY

CHILDREN'S DIVISION ENROLLMENT FORM 2017-2018

Please Circle: New Student \$25 Returning Student

Student's Name _____

Birthdate _____ Age _____

Name of Parent(s)/Guardian _____

Address _____

City _____ State _____ Zip _____

Day Phone/Cell Phone _____ Evening Phone _____

Email _____

Emergency Contact _____ Phone _____

Child's School & Grade _____

Class (please circle)

- Pre-Ballet I (Age 4-5) (Saturday, 10-11am)
- Pre-Ballet II (Age 6-7) (Saturday, 11am-12pm)
- Pre-Ballet II (Age 6-7) (Monday, 4-5pm)
- Ballet I (Tuesday & Thursday, 4:15-5:15pm)
- Ballet II (Monday, 5-6:30pm & Friday, 4:30-6pm)
- Ballet III (Wednesday, 4:30-6pm & Saturday, 12-1:30pm)
- Ballet IV (Tuesday & Thursday- Workshop, 5:15-6:45pm; Saturday, 1:30-3pm)
- YAD (Monday, 6:30-8pm; Wednesday & Friday, 6-7:30pm; Thursday Workshop, 5:15-6:45pm; Saturday, 1:30-3pm; Intermediate Pointe, 3-4pm)

Tuition Plan (please circle)

- Pay in full by June 10, 2017- 10% discount
- Pay in full by August 31, 2016 - 5% discount
- Payment in full at time of enrollment
- Semi-Annually
- Quarterly

Please indicate payment method (please circle):

- Check (payable to Ballet School NY)
- Credit Card
- Cash
- I authorize my card to be charged at time of each due date

Name on credit card _____

Credit Card # _____

Expiration Date _____ Security Code _____

Signature _____

Date _____

**Signature is required to acknowledge acceptance of the School's schedules and policies.*