

# THE SCHOOL OF ASPEN SANTA FE BALLET

550 B St. Michaels Drive Santa Fe, NM 87505/505-983-5591/FAX: 505-992-1027

Today's Date \_\_\_\_\_

Student's Last Name: \_\_\_\_\_ Age: \_\_\_\_\_

Student's First Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address (REQUIRED) \_\_\_\_\_

**IN CASE OF EMERGENCY, CONTACT (other than parent):**

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

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Person responsible for payment: \_\_\_\_\_

**PAYMENT IS BY CREDIT CARD ONLY, WE ACCEPT VISA, AMEX AND MASTER CARD (circle one)**

Name as it appears on card: \_\_\_\_\_

Card Number (do not write "on file"): \_\_\_\_\_

Signature of card holder \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Registering for (Class)	Day	Time	Tuition (Monthly)
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
Total Monthly Tuition			\$ _____
Uniform Leotard (\$25 Creative Dance/\$30 Ballet I, II, III, IV & Junior Levels)			\$ _____
Annual Registration Fee (per student)			\$ <b>25.00</b> _____
Total First Payment			\$ _____

*Upon receipt of this registration form, one month's tuition, registration fee & uniform cost will be charged to your card.*

## School and Tuition Policies

- **SCHOOL AGE REQUIREMENTS:** For Creative Dance, students must be at least three years old. To participate in *The Nutcracker* students must be at least five years old and enrolled in *The School of Aspen Santa Fe Ballet* and **PARTICIPATING IN CLASSES** by September 30<sup>th</sup>. Students who enroll after September 30<sup>th</sup> are not able to participate in *The Nutcracker*. \_\_\_\_\_ **(please initial)**
- **LEVEL:** Students will be placed in the level most appropriate for his or her development and capabilities. The suggested level also reflects the level of commitment of the student and parent. If a student does not wish to commit to the required number of classes for a specific level, the option exists for the student to take a lower level that requires fewer classes. \_\_\_\_\_ **(please initial)**
- **ATTIRE:** All students need pink tights, with feet, pink leather ballet shoes (creative dance through level 2) or pink canvas ballet shoes (level 3,4, 5 only) and a solid colored class leotard. Class leotard is a plain camisole style in the appropriate color for each level, available for purchase at Aspen Santa Fe Ballet. Skirts are only allowed for pointe classes. Level 1 through level 5 students must have hair secured in a bun. Boys will wear black shorts/tights and a white t-shirt with no print, white socks and black or white shoes. \_\_\_\_\_ **(please initial)**
- **PAYMENT.** *The School of Aspen Santa Fe Ballet* is a non-profit organization with limited resources. Tuition is to be paid monthly in advance and in full. Payment is by **Credit Card Only**, and tuition will be automatically charged on the first of every month. Monthly tuition is determined by the number of classes offered at each level for the year (September-May), not by the number of classes in any particular month. Months that have five weeks of classes are considered make-ups for those months with less days due to holidays. We must accept your payment information before your child is able to participate in our programs. \_\_\_\_\_ **(please initial)**
- **LATE FEES.** A \$15.00 fee will be charged to your account if you are late with the monthly payment. \_\_\_\_\_ **(please initial)**
- **TUITION IS NOT REFUNDABLE.** Students who miss class, or withdraw before the end of the month are still obligated for the full month's tuition. **Credit will not be given for missed classes.** Students are expected to take a make-up class at the same level or at a lower level *within one month* of the missed class. Classes cancelled by *The School of Aspen Santa Fe Ballet* will be re-scheduled. \_\_\_\_\_ **(please initial)**
- **CANCELLATION.** Students may withdraw from classes by giving **written notice** to the office (not to the teacher) by the end of the month for the coming month. If written notice has not been received by the end of the month you will still be considered enrolled in classes and obligated for the next month's tuition. \_\_\_\_\_ **(please initial)**
- **ANNUAL REGISTRATION FEE.** A fee of \$25.00 will be charged per student at the beginning of the school year to cover administration costs. The term is from beginning of September to end of August. \_\_\_\_\_ **(please initial)**
- **FINANCIAL AID.** Financial assistance and a limited number of work/study scholarships are available upon request. All current scholarships must be re-evaluated each year. The application deadline is September 30, 2008, no exceptions. All students requesting assistance **MUST** be registered in the school by that date. *The School of Aspen Santa Fe Ballet* has a limited amount of dollars to contribute to our scholarship fund and students **MUST** qualify and follow guidelines. For complete guidelines please contact Gisela Genschow, School Director. \_\_\_\_\_ **(please initial)**
- **WAIVER.** "I understand that there is a risk of personal injury associated with dance classes and performances. I represent that the above named student is in good health and physically capable of participating in dance classes, performances and recitals. On behalf of myself and the above named student, I hereby waive and release any claim against *The School of Aspen Santa Fe Ballet*, employees and contractors, arising out of personal injury occurring in connection with classes, performances or recitals or otherwise occurring in or around the dance school or other location of classes, performances or recitals. I accept responsibility for obtaining appropriate accident, health and hospitalization insurance to cover the student in the event of personal injury. In the event of an injury or other medical emergency and I cannot be reached, I authorize *The School of Aspen Santa Fe Ballet* to seek any medical assistance reasonably required and agree to be responsible for medical expenses incurred on behalf of the student." It is understood that the teaching of dance requires a certain amount of physical contact between student and teacher. Parent acknowledges that such physical contact is inherent in the teaching process and is not intended to be inappropriate. \_\_\_\_\_ **(please initial)**

**Parent's/Guardian's signature or student's signature (18 years or older):**

X \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

