



2018-2019
REGISTRATION PACKET







Photo by Jean Celeste Photography



1. REGISTRATION FORM
2. CREDIT/DEBIT CARD AUTHORIZATION FORM
3. MANDATORY RELEASE FORM
4. TUITION POLICY

2282 Townsgate Road, Suites 4/5/6, Westlake Village, CA 91361 | Phone (805) 906-2087 or (818) 707-3267 caldancetheatre@gmail.com | www.californiadancetheatre.com



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For Office Use Only Check # or Cash		
Date	Amount Paid	
Registration Fee Paid_		CC Form

# REGISTRATION FORM AUGUST 2018 - JUNE 2019

#### **PLEASE PRINT**

Date:	New st	udent, Yes c	r No?	CDT Stu	ıdent since:	
						Year
Student's Name:					Female:	Male:
Last		First		M. I.		
Address:						
City:	Zip Co	de:		_Age:	Grade in Fall	<b>:</b>
•	•					Mandatory
Home Phone:	Number	_ Student'	s Cell:	Number	Birth Date: Mor	nth Date Year
Student's Email:		P	est Family Fmail·			
	nt Clearly		estraining Ernain		Print Clearly	
Mother's Full Name:			Mother's Work N	umber:		
				Area Co	de Nu	mber
Mother's Cell Phone:	N		Mother's Occupa	ation:		
Area Code	Number					
Father's Full Name:			Father's Work Nu	mber:		
				Area Cod	le Num	nber
Father's Cell Phone:			Father's Occupat	ion:		
Area Code	Number					
Previous Dance Training?		No. of Yea	rs?	Where? _		
	Yes / No				Studio Name	and City

→ ATTACH YOUR PRE-ASSIGNED CLASS LIST TO THIS REGISTRATION FORM CLEARLY INDICATING "YES" OR "NO"

→ THE FORM BELOW IS FOR NEW STUDENTS OR ADDITIONAL CLASS REQUESTS (SUBJECT TO APPROVAL & AVAILABILITY).

Class ID #	Day	Time	Class Name	Teacher	Monthly Tuition



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Date	

## CREDIT / DEBIT CARD AUTHORIZATION FORM 2018-2019

→I AUTHORIZE CALIFORNIA DANCE THEATRE, INC., TO CHARGE MONTHLY TUITION TO
THE FOLLOWING DESCRIBED CREDIT/DEBIT CARD FOR:

Student's Name:					
Student's Name:					
Student's Name:					
Cardholder's Name o	n Card:				
	Credit Card Type:	☐ MasterCard	□ Visa	☐ Discover	
Credit Card Number: NOTE.	· If you choose to change your cre	dit card number during the y	ear, the last card su	<b>Expires:</b> bmitted on file will be used.	
→SIGNATURE OF PAI	-				D PAYMENT:
(X) Printed Name:				Today's Date:	
RELEASE OF LIABIL wish to participate in the dan include aerial dance or acroba risks of personal injury, include	<b>_ITY:</b> ce classes conducted tics. I acknowledge th ling, without limitatio	at, or under the sup nat the activities, pro on, potentially disal	ervision of, C ograms and o bling injuries	classes conducted or super and property damage. I	nc. ("CDT"), which may ervised by CDT involve , and any parent and/
or legal guardian signing this participation in any activity, p	rogram or class condu	cted or supervised	by CDT.		-
Moreover, I, and any parent an to the maximum extent perm against CDT, its owners, offic connected in any way to parti	itted by law, all rights ers, agents, employe	and claims of any es, contractors, ins	kind, includi tructors, sub	ng, without limitation, all	claims of negligence
have read this document. I fo	ully understand that tl	nis is a release of lia	bility and a c	ontract. I sign it of my ow	n free will.
Participant's Signature	 Date		 Parent/Guardia	n Signature	 Date



## TUITION POLICY 2018-2019

### I understand that my tuition payments are due by the FIRST DAY OF EACH MONTH. NO EXCEPTIONS!!

Monthly Automatic Credit Card Payment Program: Your credit card will always be charged between the 1st and the 4th of each month. An electronic receipt will automatically be sent to you via our Studio Director Management Program. (\*) Please be sure we have an accurate email address listed above. If I am paying with Cash or Check each month: Make checks payable to California Dance Theatre and reference the student's full name on your check. If my tuition payment is received after the 10th day of each month, I will also pay a \$25.00 late fee. Should my check be returned NSF, I will replace that check including a \$25.00 Service Fee within 10 days of CDT notifying me of the NSF, in the form of Cash, Money Order, or Bank Check. We do not re-deposit NSF checks. I further understand that my child will not be allowed to take class until our tuition account is paid in full. The billing cycle spans from September through June. Although classes run for only 3 weeks in June, the last week of August begins our season completing a full month. CDT reserves the right to refuse service to our school and/or our performances. Thank you.

#### NO REFUNDS OR CREDITS

Tuition adjustments CANNOT be made. Missed classes must be made up within 4 weeks of absence. If my child should change, add or drop a class, I understand that a form must be filled out at the front desk in order for bookkeeping to recognize the change and that the new tuition amount will take effect the 1st day of the NEXT calendar month.

California Dance Theatre directors and instructors are not liable for personal injuries or loss of, or damage to, personal property. Each student may decline to participate in any activity. Please inform instructor of any physical limitations you may have. NO food, gum, or drinks (except water) allowed in the studios!

## DANCE CLASSES MONTHLY TUITION PER STUDENT:

August 2018 through June 2019

CLASSES PER WEEK	COST PER CLASS	COST PER MONTH			
1	18.00	72.00			
2	17.50	140.00			
3	16.25	195.00			
4	15.25	244.00			
5	14.25	285.00			
6	13.50	324.00			
7	13.00	364.00			
8	13.00	416.00			
9	13.00	468.00			
10	13.00	520.00			
Move Stron	Move Strong\$36/mo.				
Stretch & S	trength				
	_				
Single Class (Trial)\$20.00					
Registration Fee (per student)\$30.00					

**LOST & FOUND:** CDT is NOT responsible for lost or stolen money, shoes, clothing, jewelry, etc. Please label ALL dance shoes and clothing and do not leave dance bags or wallets in dressing rooms. Every 90 days, all unclaimed items will be donated to local charities.

→ I have read and agree to these policies.

→ SIGNATURE:

