

Releve Performing Arts Student Enrollment

**at least one phone number and one email is required.

**Your first month's tuition, May's tuition and registration fee is due at the time of enrollment. NO REFUNDS

***Credit or Debit Card MUST be on file regardless of paying cash or check. Card will be ran by 1st day of month if not paid before

Student Name: _____ **Birth Date** _____

Address _____

City _____ **State** _____ **Zip** _____

Medical Notes _____

Please Check Classes Enrolling In:

- | | | |
|--|---|---|
| <input type="checkbox"/> Beg. Ballet | <input type="checkbox"/> Int./Adv. Acro 2hrs | <input type="checkbox"/> Mini Jazz (ages 5-6) |
| <input type="checkbox"/> Int. Ballet | <input type="checkbox"/> Beg. Acro | <input type="checkbox"/> Mini Hip Hop (ages 3-4) |
| <input type="checkbox"/> Adv. Ballet | <input type="checkbox"/> Beg Hip-Hop | <input type="checkbox"/> Mini Hip Hop (ages 5-6) |
| <input type="checkbox"/> Beg. Jazz | <input type="checkbox"/> Int Hip-Hop | <input type="checkbox"/> Mini Acro (ages 3-6) |
| <input type="checkbox"/> Int. Jazz | <input type="checkbox"/> Adv Hip Hop | <input type="checkbox"/> Tumbling |
| <input type="checkbox"/> Adv. Jazz | <input type="checkbox"/> Ballet/Tap 1 (ages 3-4) | <input type="checkbox"/> Ballet/Tap 2 (ages 5-6) |
| <input type="checkbox"/> Beg. Lyrical | <input type="checkbox"/> Pointe 3 hrs | <input type="checkbox"/> • 4:30pm |
| <input type="checkbox"/> Int. Lyrical | | <input type="checkbox"/> Ballet/Tap 2 (ages 5-6) |
| <input type="checkbox"/> Adv. Lyrical | <input type="checkbox"/> Mommy & Me(1-2yrs)* | <input type="checkbox"/> • 5:30pm |

Mother: _____ **Phone** _____

Email _____

Father: _____ **Phone** _____

Email _____

Payment Options

Tuition: first month's and May's tuition is due at the time of enrollment

___ Monthly \$ _____

___ Year in full with 10% discount \$ _____

**Includes monthly tuition, September-May, registration fee, recital fee, costume fee

___ Mommy and Me class \$75 (8 week session)

Recital Costume and Fee:

___ I agree to pay \$ _____ on October 15th. (30 days after enrollment Date _____)

___ I agree to pay \$ _____ in 3 monthly payments on the 1st of each month that will be charged with my tuition. (september, october, november)

___ Paid with year in full option

There are NO REFUNDS for annual fees or tuition paid monthly or year in full

Tuition remains the same, September-May, regardless of the amount of weeks in the month

Tuition is paid on the 1st of every month, a late charge will be added to your account if it is not received by the 2nd

Tuition is not pro-rated, if you miss a class or due to holidays. If RPA cancels a class unexpectedly, a makeup class will be announced

Add on classes must be taken in conjunction with another class or they are \$45.00

You may pay your recital fees in small increments to avoid a large bill in October. NO REFUNDS

Credit Card Information:

(Circle One) **Visa** **Mastercard** **Discover**

Number: _____

Name on card _____

Exp. Date _____

Billing Zip Code _____

CSV Number _____

Office Use Only:

Total Due: _____

Total Paid: _____

Total Owed: _____

Policies Agreement Form

Payment Information

Tuition is due by the first of each month. If accounts are paid after the 1st of the month, there will be a \$15.00 late fee applied to the account balance. Students will not be allowed to enter the classroom if their account is not balanced. There is a \$20.00 returned check charge for any checks returned by the bank. There will be NO REFUNDS for annual fees or tuition paid monthly or year in full. Tuition is not pro-rated if you miss a class or due to holidays. If RPA cancels a class unexpectedly, a makeup class will be announced at no charge. All accounts are required to have a credit or debit card on file to attend RPA.

Annual Fees

RPA charges three required annual fees throughout the year. A \$25.00 registration fee is due immediately upon registering for the current season. A \$75.00 costume fee, per class, is due October 15th for any class that participates in the annual recital and a \$100.00 recital fee is due by October 15th for each child that participates in recital, with a maximum fee of \$175.00 for a family. Costume fees and recital fee can be divided and paid in payments over the months of September, October, and November, and would be charged with tuition on the 1st of each payment month. NO REFUNDS

Information Responsibility

It is the responsibility of the parent or adult student to be aware of all RPA functions and events such as viewing days, recitals, performances and dates the studio is open and closed, including inclement weather closings. **PLEASE FOLLOW OUR FACEBOOK PAGE FOR UPDATES. E-mails are sent as well.**

Media Release

As the legal parent or guardian, I release all team and/or individual photographs, videos, quotes, interviews and/or other "media" of the participant and/or the undersigned to Releve Performing Arts.

Release Of Liability

As the legal parent or guardian, I release and hold harmless Releve Performing Arts, its' owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises of any premises under the control and supervision of Releve Performing Arts, its' owners and operators or in route to or from any of said premises

Medical Emergency

The undersigned gives permission to Releve Performing Arts, its' owners and operators to seek medical treatment for the participant in the event they are not able to reach a parent or guardian. I hereby declare any physical/mental problems, restrictions, or condition and/or declare the participant to be in good physical and mental health. I request that our doctor/physician _____ be called and that my child be transported to _____ hospital. Please include physician's phone number _____

Signature Release

I hereby acknowledge that I have read the statements above, as well as the RPA studio's policies and procedures and agree to participate accordingly.

Name _____ **Date** _____