

2017/2018 Registration Form



<p>Step 1 Student Information</p>	Dancer- Last Name: 1. _____ Home Phone: _____ 2. _____ Home Phone: _____ 3. _____ Home Phone: _____	First Name(s): _____ Cell: _____ _____ Cell: _____ _____ Cell: _____	Elementary/High School 1. _____ 2. _____ 3. _____
Address (include postal code) _____		Dancer(s) Email: 1. _____ 2. _____ 3. _____	
Mother's Name _____		Father's Name _____	
Mother's Contact Information: Home #: _____ Cell #: _____ Work #: _____ Occupation: _____ E-mail: _____		Father's Contact Information: Home #: _____ Cell #: _____ Work #: _____ Occupation: _____ E-mail: _____	
Who would you like to receive weekly informational e-mails: (Please check all that apply) <input type="checkbox"/> Dancer(s) <input type="checkbox"/> Mother <input type="checkbox"/> Father			
Emergency Contact Name (other than parents) _____		Primary Phone No.: _____	
Student Name:	Student 1:	Student 2:	Student 3:
Birth date (mandatory)			
Health Card # (mandatory)			
Medical Concerns			

<p>Step 2 Class Registration Information</p> <p>Classes each student wishes to register for – Include class type, level and day registered for (i.e. Ballet 4 Th-6:00)</p>	Student 1:	Student 2:	Student 3:
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Class	Class	Class	Class
Total Classes per Level:	Total Classes per Level:	Total Classes per Level:	Total Classes per Level:

How did you hear about Youth Ballet?

Returning Student Yellow pages Other (specify): _____
 Word of mouth Newspaper **NEW STUDENTS to our studio with DANCE EXPERIENCE** - please indicate
 School flyer Internet where previously danced _____

Consent: I consent to having my child's photograph taken for promotional or other such purposes, including the internet, as deemed appropriate by Youth Ballet **yes** **no**

_____ _____
Signature of parent / guardian Date

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Step 3
Fee Calculation

The Youth Ballet Staff will enroll your child in the appropriate classes and assist you in making the following fee calculations based on a number of discounts.

Family Fundraising Commitment (# classes x \$60) = \$ _____ Maximum \$300 per family.

(ALL RAD, ADULTS, AND ADAPTED DANCERS ARE EXEMPT FROM FUNDRAISING)

Your family's fund raising commitment is based on the number of classes taken per week by all eligible members of your family x \$60.
See Youth Ballet Fees Brochure for details on fundraising options.

- | | |
|--|---|
| <input type="checkbox"/> Bingos x ____ (\$60 per bingo) | <input type="checkbox"/> Payout in 3 installments \$ _____ x 3 Sept 1, Dec 1, March 1 |
| <input type="checkbox"/> Gift wrap etc (30% of total sold)..... | <input type="checkbox"/> Payout Monthly \$ _____ x 9 |
| <input type="checkbox"/> Chocolates x __ cases (\$60 per case gives \$30 credit) | <input type="checkbox"/> Payout in full \$ _____ Date: _____ |

Class Fees with Family Discounts	Supplementary fees	Extras	Fundraising
Student 1 0% discount Fees x # months	Costumes \$80 x # classes R&M, P.B., Primary Modern, Jazz, Ballet Levels 1,2,	RAD fees	(Chocolates – postdated cheque for \$60/case dated October 1 st)
Student 2 5% discount Fees x # months	Costumes \$100 x #classes (Ballet, Modern, Jazz Levels 3 and up Boys, Hip Hop, Adapted)	Company fees	No. of Cases
Student 3 10% discount Fees x # months	Year Book \$28	Ensemble Fees	NOTE: MEMBERSHIP AND REGISTRATION FEES MUST BE PAID AT TIME OF REGISTRATION
Student 4 15% discount Fees x # months	Recital Childcare \$10 Adapted, R&M, Pre-Ballet, Primary, Levels 1, 2 and 3	Membership fee \$15 or \$20/family \$ _____ + _____ Registration fee \$15 per dancer	

	Class fees x # of months	+ Total Supp. Fees	+ Fundraising Fees	= Total Fees	+ Membership fee \$15 or \$20 /family \$ _____ + _____ (Registration Fee \$15 per dancer)	TOTAL FEES (5% discount on yearly class fees if paid in full)
<p>Step 4 Total Fees</p>	Yearly					
	TOTAL MONTHLY FEES:					

Step 5
Payment Method

I WOULD LIKE TO PAY YOUTH BALLET by the following payment method for all fees:

Pay Account in full by cheque or Credit Card (attached) Payment by postdated cheques (attached)

Monthly Bank Pre-authorized Payments (Void Cheque & Form attached) or Credit Card

I AUTHORIZE YOUTH BALLET to process a monthly debit on my credit card on the first day of each month from _____ (MM/YYYY) Credit Card Type: Visa Mastercard

No. _____ Expiry Date: _____

Signature _____ **Date:** _____