

# MID-ATLANTIC BALLET 2011-12 STUDENT REGISTRATION

Please complete one registration form for each student

New Registration \_\_\_\_\_ Renewal \_\_\_\_\_ MAB Level \_\_\_\_\_

Student Name \_\_\_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone# \_\_\_\_\_ E-mail Address \_\_\_\_\_

Mom's Employer \_\_\_\_\_ Mom Work# \_\_\_\_\_ Mom Cell# \_\_\_\_\_

Dad's Employer \_\_\_\_\_ Dad Work# \_\_\_\_\_ Dad Cell# \_\_\_\_\_

Does your employer offer a matching gifts program? \_\_\_ Yes \_\_\_ No

Employer contact info for the matching program: \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

New MAB Students: Where have you danced before? \_\_\_\_\_

How did you hear about MAB? \_\_\_\_\_

Please remember to sign and date the waiver and release form on the back of this sheet. Below please find the information necessary for the completion of your registration form:

**ENROLLMENT FEE:** This nonrefundable yearly fee of \$50 is for each student enrolled and covers MAB's costs associated with processing registration. ***NEW STUDENTS*** may option to enroll by semester (September through December and January through June). If enrolling by semester, the registration fee will need to be paid for each semester that the students is enrolled. The fee must accompany your registration and can be made via check, cash or VISA/Mastercard. *Please note that \$10 will be charged for each returned check.*

**FAMILY DISCOUNTS:** Offered to families with more than one student enrolled. A 10% tuition discount is offered for the second student, who is registered for the lesser number of hours. A 20% discount is offered for each additional student for the lesser number of hours.

**TUITION REFUND POLICY:** ***NEW STUDENTS:*** Within 15 days after your first class, if you are not satisfied with the quality of dance training provided by MAB, you may withdraw from classes and a refund will be issued for all classes not taken. ***CONTINUING STUDENTS*** will be issued a refund or credit only in the event of a medical disability verified by a physician.

**CANCELLATION / MODIFICATION POLICY:** A mid-year "open enrollment" period will be held in January at which time students will be allowed to increase or decrease their hours of enrollment and tuition adjustments will be made accordingly. Requests for adjustments at any other time must be made in writing to the Artistic Director and are unlikely to be accompanied by a tuition rebate unless for medical reasons as stated above or extremely extenuating circumstances.

**Please return this form ASAP in person or by mail to: Mid-Atlantic Ballet, P.O. Box 161, Newark, DE 19715-0161.**

WAIVER & RELEASE  
This is required for each student

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

1. I understand that Mid-Atlantic may, from time to time, photograph and/or videotape my child named above, and I hereby authorize Mid-Atlantic Ballet to use these photographs and videotapes for archival and publicity purposes only.

2. Recognizing the risks of illness and injury inherent in any dance program, I fully understand that I am hereby waiving and releasing of Mid-Atlantic Ballet, its employees and the Board of Directors from any and all claims, costs, liabilities, expenses, and/or judgments, including attorney's fees and court cases arising out of the participation of the above named student in Mid-Atlantic Ballet's programs, or any illness or injury resulting thereof, and thereby agree to indemnify and hold harmless Mid-Atlantic Ballet, its employees, and Board of Directors from and against any and all claims except for illness or injury resulting from gross negligence or willful misconduct on the part of Mid-Atlantic Ballet.

3. I hereby execute and deliver the Waiver and Release to induce Mid-Atlantic Ballet to permit me/my child to participate in its programs. I hereby grant the staff and/or Board of Directors permission to administer first aid and/or call 911 in case of a medical emergency while I am/my child is attending classes, rehearsals, and performances or events on- or off-site. I understand Mid-Atlantic Ballet will attempt to first notify parents and guardians in case of emergency.

4. I understand that the art of dance and nature of dance instruction may sometimes require a teacher to touch me/my child. I also understand that this will happen in a caring, gentle, and appropriate manner.

**I have read the above policy and have executed this waiver and release on (date) \_\_\_\_\_, 2011.**

**Parent's Signature:** \_\_\_\_\_

Print Name: \_\_\_\_\_

## SCHEDULE OF CLASSES (PLEASE MARK YOUR CHOICES):

**Placement** in all classes requires an evaluation by the artistic director. Levels *A* & *B* should attend at least once a week, Level *C* students should attend at least twice a week, Level *D* should attend at least three times a week, Level *E* should attend four times a week, Level *F* should attend four or five times a week, Levels *G*, *H*, & *I* should attend five times a week.

BALLET LEVEL		PLEASE MARK DESIRED CLASSES AND TOTAL THE CLASS HOURS		
<b>Ballet A</b>		Tuesday 4:30-5:00pm	.50	_____
		Thursday 4:30-5:00pm	.50	_____
		Saturday 11:30am-12pm	.50	_____ <b>Total Hours=</b>
<b>Ballet B</b>		Monday 5:00-6:00pm	1.00	_____
		Wednesday 5:00-6:00pm	1.00	_____
		Saturday 9:00-10:00am	1.00	_____ <b>Total Hours=</b>
<b>Ballet C</b>		Monday 5:00-6:00pm	1.00	_____
		Wednesday 5:00-6:00pm	1.00	_____
		Saturday 9:00-10:00am	1.00	_____ <b>Total Hours=</b>
<b>Ballet D</b>		Monday 6:00-7:00pm	1.00	_____
		Wednesday 6:00-7:00pm	1.00	_____
		Thursday 5:00-6:00pm	1.00	_____
		Saturday 10:00-11:00am	1.00	_____ <b>Total Hours=</b>
<b>Ballet E</b>		Monday 6:00-7:00pm	1.00	_____
	Contemporary	Tuesday 5:00-6:30pm	1.50	_____
	W/Pre-Pointe	Thursday 5:00-6:30pm	1.50	_____
		Saturday 10:00-11:30am	1.50	_____ <b>Total Hour=</b>
<b>Ballet F</b>	W/ Pointe	Monday 7:00-9:00pm	2.00	_____
	Contemporary	Tuesday 5:00-6:30pm	1.50	_____
		Wednesday 7:00-9:00pm	2.00	_____
	W/Pre-Pointe	Thursday 5:00-6:30pm	1.50	_____
	Pilates	Saturday 11:00-11:45am	.75	_____
	Pointe	Saturday 12:00-2:00pm	2.00	_____ <b>Total Hours=</b>
<b>Ballet G</b>	Pointe	Monday 7:00-9:00pm	2.00	_____
		Tuesday 6:30- 8:00pm	1.50	_____
	Pointe	Wednesday 7:00-9:00pm	2.00	_____
	Contemporary	Thursday 6:30-8:00pm	1.50	_____
	Pilates	Saturday 11:00-11:45am	.75	_____
	Pointe	Saturday 12:00-2:00pm	2.00	_____ <b>Total Hours=</b>
<b>Ballet H/I</b>	Pointe	Monday 7:00-9:00pm	2.00	_____
		Tuesday 6:30-8:00pm	1.50	_____
	Pointe	Wednesday 6:00-8:00pm	2.00	_____
	Contemporary	Thursday 6:30-8:00pm	1.50	_____
	Pilates	Saturday 11:00-11:45am	.75	_____
	Pointe	Saturday 12:00-2:00pm	2.00	_____ <b>Total Hours=</b>
<b>Boy's Class</b>		Tuesday 5:00-6:30pm	1.50	_____ <b>Total Hours=</b>
			<b>TOTAL HOURS PER WEEK=</b>	_____

**NOTES:** These dates and times are for the full year- September 6, 2011 to June 9, 2012 for a total of 36 weeks of instruction.

