

berkeley ballet theater

Summer Technique Classes C/D

July 5 - August 20, 2010 Registration Form

Student's Name _____ Age _____ Birthdate _____

Address _____ City _____ State ____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Parent's E-mail _____

Adult Responsible for Payment _____ Phone (____) _____

Address (if different from above _____ City _____ State ____ Zip _____

Years in ballet _____ Present level _____ Currently on pointe: yes ____ no ____

Dance School/Teacher _____

Allergies, injuries or medical conditions _____

Emergency Contact _____ Phone (____) _____

Select number of classes per week and circle days. Multiply by number of weeks. If fewer than seven weeks, please indicate dates. Please call the office at 510-843-4688 ext.112 for level placement and pointe class schedule.

TECHNIQUE CLASSES: 9:00 AM – 11:15 AM Monday-Friday

TWO CLASSES PER WEEK M T W TH F \$28.00 x ____ weeks = \$ _____ (Seven-week rate \$196.00)

THREE CLASSES PER WEEK M T W TH F \$38.00 x ____ weeks = \$ _____ (Seven-week rate \$266.00)

FOUR CLASSES PER WEEK M T W TH F \$46.00 x ____ weeks = \$ _____ (Seven-week rate \$322.00)

FIVE CLASSES PER WEEK M T W TH F \$52.00 x ____ weeks = \$ _____ (Seven-week rate \$364.00)

POINTE CLASSES: 11:30 AM – 12:30 PM (Incl. Variations every Friday July 5 - Aug 13; Modern class M-F August 16 - 20)

TWO CLASSES PER WEEK M T W TH F \$26.00 x ____ weeks = \$ _____ (Seven-week rate \$182.00)

THREE CLASSES PER WEEK M T W TH F \$35.00 x ____ weeks = \$ _____ (Seven-week rate \$245.00)

FOUR CLASSES PER WEEK M T W TH F \$42.00 x ____ weeks = \$ _____ (Seven-week rate \$294.00)

FIVE CLASSES PER WEEK M T W TH F \$47.00 x ____ weeks = \$ _____ (Seven-week rate \$329.00)

ADD: Non-refundable processing fee \$ 30.00

TOTAL \$ _____

PAYMENT ENCLOSED \$ _____

Please circle payment type: Cash Check MC Visa

Credit card # (required) _____ Exp.Date (MM/YY) _____

I have read and accept the tuition and refund policies explained in this application. I understand that I am responsible for the full tuition for the program I have selected. Returned checks are subject to a \$15 fee. THERE ARE NO REFUNDS AFTER JULY 5, 2010.

Signature of adult responsible for payment:

_____ Date _____

(form continues on other side)

Summer Technique Classes

2010 Registration Form

RELEASE AND CONSENT

I, _____ as a parent/legal guardian of _____, hereby give my permission and consent for his/her image to be included in marketing brochures, posters, flyers, video and televised publicity, and web site for Berkeley Ballet Theater, its programs and productions. I hereby release Berkeley Ballet Theater from any and all damages, liabilities and claims arising out of or relating to the above-named child's image being used in Berkeley Ballet Theater's promotional materials and videos. I understand my child's photograph and/or live image will be presented to the public for the purposes of promoting the programs available at Berkeley Ballet Theater and its productions to which the public is invited. I hereby give my consent to the above-named child's photograph and/or live image and the likeness in the marketing of the Berkeley Ballet Theater. I have signed this document on the date indicated below to signify my understanding and agreement.

Signature of Parent/Guardian _____ Date _____

How did you hear about us? _____

FALL CLASSES BEGIN TUESDAY, SEPTEMBER 7, 2010.