

# REGISTRATION FORM/AUTOMATIC PAYMENT CONSENT FORM

School:  Main  Ken Caryl  Highlands Ranch

Program:  Dance  Music  Gymnastics

Student's Last Name: \_\_\_\_\_ Student's First Name(s): \_\_\_\_\_

M  F Student Birth-date: \_\_\_\_\_ Parent's Name: \_\_\_\_\_  
Day Month Year

School/Grade \_\_\_\_\_ Email: \_\_\_\_\_

Phone #: \_\_\_\_\_ Work/Emergency Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Street City Zip Code

Where they heard about us:  Flyer  Auction  Yellow Pages  Post Card  Sign  Internet

Referral \_\_\_\_\_  Other \_\_\_\_\_

Date Registered: \_\_\_\_\_ Date Starting Lessons: \_\_\_\_\_  
Day Month Year Day Month Year

Class(es) \_\_\_\_\_ Teacher(s) \_\_\_\_\_

Total Class Hours:  30 min  1 Hour  1.5 hours  2.0 Hours  2.0 Hours  2.5 Hours  3.0 Hours  3.5 Hours  4/0 Hours

Medical Conditions:  No  Yes \_\_\_\_\_

**Method of Payment**

**\*All charges will appear on your bank or credit card statement as Little Theatre**

**Checking Account – attach void check here**

Visa  Master Card \_\_\_\_\_  
Card Number Expiration Date

Card Holder's Name \_\_\_\_\_

I hereby authorize Little Theatre Culture Centers, Inc. to charge my account the amount of

\$ \_\_\_\_\_ on the first day of each month starting \_\_\_\_\_ 20\_\_\_\_  
(tuition) (date)

\$ \_\_\_\_\_ on \_\_\_\_\_ for Registration Fee \$ \_\_\_\_\_ on May 15th for Performance Fee

I will give the school office one month's written notice from the first of the month to discontinue these charges. I understand the school policies on the back of this page and agree to abide by them.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**OFFICE USE:**

	MONTHLY DANCE FEE
Reg Fee	
Programs Taking	

	MONTHLY OTHER FEE
Reg Fee	
Programs Taking	
Costume Fee	

First Month's Fee: \_\_\_\_\_ Ongoing Monthly Fee: \_\_\_\_\_

**Little Theatre Culture Centers, Inc.  
Policies and Procedures**

**Registration:** A non-refundable fee of \$50.00 per student is required upon registration and renewed in June. This fee includes the recital costume fees for the year.

**Payment of Fees:** Tuition must be paid by automatic bank account debit, automatic credit card payment. We will accept check payment only as alternative while your automatic debit is being set up.

**Payment by Automatic Bank Account Debit or Automatic Credit Card Charge:**

Tuition will be debited from your bank account on the 1<sup>st</sup> day of each month, or charged to your credit card the 1<sup>st</sup> day of each month. The month of June is non-refundable. You must sign an auto-debit or automatic credit card charge authorization form. Credit card or bank debit payments are not accepted for in-person payment on a monthly basis. Payment must be made by pre-authorized automatic monthly payment.

All NSF payments will be charged a \$25.00 NSF fee; this includes declined credit/debit cards or ACH transactions. The month of June is non-refundable. It is the responsibility of the parent or adult student to be responsible for updating account numbers or expirations on credit/debit cards.

**Costume and Tee-shirt Fees:** Included in your registration is the use of the costumes for Little Theatre Shows. Gymnasts receive a Tee- Shirt for use in the meets. If a child is enrolled in Dance and Gymnastics, the total fee for both is \$55.00.

**Withdrawal and Refunds:** There is a two-month minimum for all lessons. One-month written notice from the first of the month is required to discontinue any classes. Withdrawal must be done in person and will not be accepted over the phone. Written withdrawal must be done through the main office and not with the teacher. Withdrawal must occur within the first 7 days of the month.

To withdraw from classes a parent or adult student must:

1. Inform school administration in person, and
2. Complete and sign a withdrawal form provided by the school office.

All automatic bank debiting or credit card charges will stop after the one-month notice period. Little Theatre Culture Centers, Inc. Main, Ken Caryl and Highlands Ranch reserve the right to terminate lessons to any students without notice. In such a case a refund for unused lessons will be given.

**Extreme Weather or Unexpected Interruption of Classes:** If the school must cancel classes due to extreme weather or events beyond our control such as power outages, make up lessons will be offered. No refunds for lessons missed due to these reasons will be given.

**Substitutions:** The school reserves the right to provide a substitute teacher if the regularly scheduled teacher is ill or otherwise unable to teach classes. If a teacher is ill and the school cannot arrange a substitute any missed classes will be made up.

**Dress Code:** Required dancewear and dance shoes must be worn to all classes. For safety reasons dancers are not permitted to wear jewelry. Long hair must be tied back.

**Parent's Responsibility to be Aware of Dates and Events:** It is the responsibility of the parent or adult student to be aware of all school activities, such as viewing days, recitals, extra classes, and dates the school is open or closed. The school will post all such notices on the dance "What's New" board or the dance bulletin board as well as sending notices home with the students. It is the parent's responsibility to regularly check these boards to ensure they are informed. It is the responsibility of the parents or adult students to inform the school of any address or telephone number changes.

**Care of Students:** The school is not responsible for providing before or after class care for students. Parents with students under the age of 5 are to remain in the school during classes. Students are not to be left at the school for excessive time before or after class.

**Injuries:** Parents, legal guardians of minor students and adult students waive the right to any legal action for any injury sustained on school property resulting from normal dance activity or any other activity conducted by the students before, during or after class time.

**Photo Release:** The school is hereby granted permission to take photographs of the students to use in brochures, web sites, posters, advertisements and other promotional materials the school creates. Permission is also hereby granted for the school to copyright such photographs in its name.

**I have read and understand the above policies and procedures and agree to abide by them.**

\_\_\_\_\_  
Date Student Name (please print)

\_\_\_\_\_  
Date Signature of Parent or Adult Student

# REGISTRATION FORM FOR ADDITIONAL STUDENTS

**School:**  Main  Ken Caryl  Highlands Ranch

**Program:**  Dance  Music  Gymnastics

Student's Last Name: \_\_\_\_\_ Student's First Name(s): \_\_\_\_\_

M  F Student Birth-date: \_\_\_\_\_ Alternate Parent's Name: \_\_\_\_\_  
Day Month Year

Phone #: \_\_\_\_\_ Work/Emergency Phone #: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip Code

Date Registered: \_\_\_\_\_ Date Starting Lessons: \_\_\_\_\_  
Day Month Year Day Month Year

Class(es) \_\_\_\_\_ Teacher(s) \_\_\_\_\_

Total Class Hours:  30 min  1 Hour  1.5 hours  2.0 Hours  2.0 Hours  2.5 Hours  3.0 Hours  3.5 Hours  4/0 Hours

Medical Conditions:  No  Yes \_\_\_\_\_

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**Program:**  Dance  Music  Gymnastics

Student's Last Name: \_\_\_\_\_ Student's First Name(s): \_\_\_\_\_

M  F Student Birth-date: \_\_\_\_\_ Alternate Parent's Name: \_\_\_\_\_  
Day Month Year

Phone #: \_\_\_\_\_ Work/Emergency Phone #: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip Code

Date Registered: \_\_\_\_\_ Date Starting Lessons: \_\_\_\_\_  
Day Month Year Day Month Year

Class(es) \_\_\_\_\_ Teacher(s) \_\_\_\_\_

Total Class Hours:  30 min  1 Hour  1.5 hours  2.0 Hours  2.0 Hours  2.5 Hours  3.0 Hours  3.5 Hours  4/0 Hours

Medical Conditions:  No  Yes \_\_\_\_\_