

Returning Student
 New Student

REGISTRATION FORM

Fees reflect paid in full before JUNE 17, 2016 deadline

Please Print & Complete ALL Sections

1. Student Information																
Name:					Ethnicity:				Age:							
School Attending:					Grade/Year:				DOB:							
Home address: Apt.					City:				Zip Code:							
Student's Phone:					Student's Email:											
Emergency Contact <u>other than</u> Responsible Party:					Relationship to student:				Emergency Phone:							
Dance History: Previous training, most recent classes, teachers & locations:																
2. Please select the sessions, individual techniques or classes you are registering for. If you only will enroll in single techniques or single daily classes, please indicate by checking the boxes.																
<input type="checkbox"/> Both Sessions: June 27 – July 8, 2016											\$ 775.00	\$				
SESSION I. June 27-July 1, 2016						SESSION II. July 4-8, 2016										
<input type="checkbox"/>	Session 1: \$475.00					<input type="checkbox"/>	Session 2: \$475.00					\$				
<input type="checkbox"/>	Horton	9:30 - 11:00AM	M	T	W	T	F	<input type="checkbox"/>	Classical Ballet	9:30 - 11:00AM	M	T	W	T	F	\$
<input type="checkbox"/>	Graham	11:15 - 1:00PM	M	T	W	T	F	<input type="checkbox"/>	Contemporary Modern	11:15 - 12:45PM	M	T	W	T	F	\$
<input type="checkbox"/>	Dunham	2:00 - 3:30PM	M	T	W	T	F	<input type="checkbox"/>	Tap	1:45 - 3:00PM	M	T	W	T	F	\$
<input type="checkbox"/>	Jazz	3:45 - 5:15PM	M	T	W	T	F	<input type="checkbox"/>	West African	3:15 - 5:00PM	M	T	W	T	F	\$
<input type="checkbox"/>	Single Technique: \$175.00					(Please check each box that applies)						\$				
*	Single Daily Class: \$45.00 each based on availability after June 17.											\$ 0				
TOTAL TUITION FEE(S) DUE:											\$					

MEDICAL FORM AND WAIVER

PLEASE COMPLETE ALL SECTIONS

Student's Name:			Date:								
Birthdate:		Age:	<input type="checkbox"/> Female	<input type="checkbox"/> Male	<input type="checkbox"/> Single		<input type="checkbox"/> Married				
Address:				Apartment:							
City :		State:		Zip Code:							
Cell Phone:		Home:		Other:							
Email:											
STUDENT ETHNICITY											
<input type="checkbox"/> Black							<input type="checkbox"/> White	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> Other: (please list)	
PARENT/GUARDIAN INFORMATION if participant is under age 18:											
Parent/Guardian Name:											
Address:				Apartment:							
City :		State:		Zip Code:							
Cell Phone:		Home:		Other:							
Email:											
List any physical or dance related problems you have including injuries, bone, joint, or muscular disorders, etc:											
List any medical conditions you have including asthma, high or low blood pressure, heart conditions, allergies etc:											
List medications that you take regularly(prescription/non-prescription):											
In Case of Emergency Notify											
Contact's Name:											
Contact's Phone:				Relationship:							
Physician:				Phone:							
Liability Waiver											
In consideration of the acceptance of this registration entry, I, the undersigned, accept full responsibility of the above named student participant in this event, or while on the premises of the event; and I hereby release and hold harmless the Dallas Black Dance Theatre and all other persons and entities associated with this event from all injuries and damages.											
Student's Signature:				Date:							
Parent/Guardian Signature (if student is under age 18)				Date:							
** You may use the reverse side of this form for additional information or explanation of any medical conditions or medications if necessary.											

PAYMENT FORM AND FINANCIAL AGREEMENT

1. Responsible Party Information (to be completed by Adult student, Parent or Legal Guardian)

Student's Name or Responsible Party:

Billing address:

Apt:

City/State:

Zip Code:

Cell Phone:

Work Phone:

Other:

Email Address:

Employer:

Does your employer contribute to the Arts? Yes No Offer matching Funds? Yes No

2. Method of Payment

CASH PAYMENT

MONEY ORDER / CHECK ENCLOSED ***Please make checks payable to: Dallas Black Dance Theatre*

DEBIT OR CREDIT CARD PAYMENT (Please include \$5.00 card processing fee on each credit/ debit card transaction)

VISA

MASTERCARD

AMEX

DISCOVER

CARD NUMBER:

EXP:

CVC:

I, the undersigned, am responsible for the full tuition and understand that there is no adjustment of tuition when the student is absent or for holidays. I give permission for the above account to be charged the tuition fees associated with this enrollment. I have read, understand and agree to abide by all of the policies and procedures of the Dallas Black Dance Theatre.

X

Signature of Cardholder/ Responsible Party

Date

Mail Completed Forms with Payment to:

**Dallas Black Dance Theatre
2016 Summer Intensive
P.O. Box 131290 Dallas, TX 75313**

----THIS SECTION FOR STAFF USE ONLY----

TOTAL AMOUNT DUE:		DATE RECEIVED:	STAFF INITIALS:
AMOUNT PAID:		<ul style="list-style-type: none"> PAYMENT MUST ACCOMPANY FORM WHEN SUBMITTED THERE IS A \$30 NSF FEE ON RETURNED CHECKS TUITION IS NOT REFUNDABLE 	
METHOD:			
BALANCE DUE:			
BALANCE PAID:		DATE RECEIVED:	STAFF INITIALS:

TUITION INFORMATION

	EARLY REGISTRATION: Must be paid by June 1, 2016 deadline	REGULAR REGISTRATION: Must be paid by June 17, 2016 deadline	LATE REGISTRATION: (Space Permitting) Paid June 18-July 8, 2016
Tuition Fee for both sessions:	\$750.00	\$775.00	\$825.00
Tuition Fee for single session (all classes for one week):	\$450.00	\$475.00	\$550.00
Tuition Fee for single technique (all week):	\$150.00	\$175.00	\$250.00
Single Class Drop in Rate:	\$45.00 each based on availability after June 17		

FINANCIAL PROCEDURES AND POLICIES

- **Payment and form submission options:**
 - **In person:** 2700 Ann Williams Way, Dallas, TX 75201
 - **By Email:** scan completed forms and attach to email then send to: academy@dbdt.com
 - **By Fax:** send completed forms to (214) 871-2842.
- There is a \$5.00 processing fee for all credit/debit card transactions.
- A \$30 fee is added to checks returned for insufficient funds and must be reconciled with certified funds (cash, cashier's check, credit/debit card, and/or money order) within 10 business days from the date of verbal or written notification by Dallas Black Dance Academy.
- No personal checks will be accepted after a check has been returned; **cash, money order, or credit/debit card** will be the only acceptable forms of payment for all future payments.
- Students are required to pay for all classes. Dallas Black Dance Theatre is not responsible for classes missed due to illness, injury or time conflicts.
- DBDT is not responsible for lost or misplaced personal property.
- **Registration fees are non-refundable.**