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BALLET THEATRE OF TOLEDO

*NEW STUDENT Registration Form ---2023-2024 School Year  
Please complete in FULL as we begin a new school year.*

**Student Information**

Name \_\_\_\_\_ Date of Birth/Age \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Name of local newspaper \_\_\_\_\_  
Family email address \_\_\_\_\_  
How did you hear about us? \_\_\_\_\_  
May we add your information to an "in-studio" directory for BTT families? \_\_\_\_\_

**Parent Information**

**Parent #1** \_\_\_\_\_ Home/Cell phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Work phone # \_\_\_\_\_  
**Parent #2** \_\_\_\_\_ Home/Cell phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Work phone # \_\_\_\_\_

**Classes** (Note: Classes are filled on a first come, first serve basis.)

Level \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_  
Level \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_  
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Level \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_  
Level \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_  
Level \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

**Emergency Contact Information**

Emergency Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_  
Emergency Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

## Tuition Calculations

Full Tuition Amount Or \* Installment Amount \_\_\_\_\_

**\*Second installment will automatically be charged to your credit card on March 11th**

Family Discount (15% per additional student; applies to lesser tuition rate) - \_\_\_\_\_

Annual Registration Fee \$40 (fee is waived with a current BTT membership) + \_\_\_\_\_

**Or** **Membership Amount** (tax deductible donation) + \_\_\_\_\_

Coppelia (\$50-\$149) \_\_\_\_\_ Giselle (\$150-\$249) \_\_\_\_\_ Cinderella (\$250-\$499) \_\_\_\_\_

Sleeping Beauty (\$500-\$999) \_\_\_\_\_ Swan Lake (\$1000-\$2499) \_\_\_\_\_ Nutcracker (\$2500 & up) \_\_\_\_\_

How would you like your name to appear in the program?  
\_\_\_\_\_

**Total Due**-----**\$**\_\_\_\_\_

**Please consider CASH or CHECK. BTT receives the FULL value of your payment.**

Method of payment: Cash \_\_\_\_\_ Check \_\_\_\_\_ Credit card \_\_\_\_\_ PayPal \_\_\_\_\_

We accept the following credit cards: Visa, Mastercard and Discover. If paying by credit card, please provide the following information.

Name on the card \_\_\_\_\_ Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ Verification Number \_\_\_\_\_

Please keep my Credit Card information on file \_\_\_\_\_ Signature: \_\_\_\_\_

Please read the following: I am aware that ballet dancing, stretching and other activities associated with your participation, places unusual stress on the body and carry with it the risk of physical injury. On behalf of my child and myself, I assume the risk and agree that the **Ballet Theatre of Toledo**, its Board of Trustees, the faculty, volunteers, and any of the chaperones and agents of the **Ballet Theatre of Toledo** shall not be liable in any way and released for any injuries sustained during attendance at the school or any of its related functions for any act which might constitute a claim for negligence. I further understand that my child, at all times, is responsible for his/her personal belongings and I accept full responsibility for loss of personal items whether lost, damaged or stolen.

Parent or Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

I, \_\_\_\_\_, give my permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like (the "Publicity Materials"), taken or made on behalf of Ballet Theatre of Toledo, Inc. ("BTT"). I agree that BTT has complete ownership of the Publicity Materials, including the entire copyright, and may use them for any purpose consistent with BTT's mission. These uses include, but are not limited to, illustrations, bulletins, exhibitions, film, videotapes, reprints, reproductions, publications, advertisements, and any promotional or educational materialism any medium now known or later developed, including the use of the Publicity Materials on the internet. I acknowledge that I will not receive any compensation for the use of the Publicity Materials and hereby release BTT and its members, trustees, directors, officers, employees, agents and assigns from any and all claims which arise out of or are in any way connected with such use. I have read and understood this consent and release.

Parent / Legal Guardian (if under age 18) signature \_\_\_\_\_ Date \_\_\_\_\_

For office use only:

\_\_\_\_\_ QB \_\_\_\_\_ EM  
\_\_\_\_\_ DM \_\_\_\_\_ B

Installments:

\_\_\_\_\_ January 8<sup>th</sup>  
\_\_\_\_\_ March 11<sup>th</sup>  
\_\_\_\_\_ Paid in Full