



# THE PALACE



## School of Dance Spring / Theatre Registration Form

**CLASSES: Start the week of January 9, 2017**

- Class instructor may re-assign students to a different level after evaluations.
- Arts Enter School of Dance follows the Northampton County School Schedule for classes.
- ALL classes must be **paid in full before classes start date**: January 9, 2017. Please make checks payable to Arts Enter Cape Charles, Inc. Please contact Sue for payment plan option if needed.
- Spring show will be **Friday May 5, 2017 at 7:00 PM and Saturday May 6, 2017 at 3:00 PM.**
- Comments and/or concerns please contact Sue Anglim ~ 757-639-9566 ~ [sue@artsenter.com](mailto:sue@artsenter.com)

**Some Changes to be aware of:**

- Class payment is due BEFORE student can start classes. IF you are unable to make full payment contact the Sue.
- Theatre is \$75.00 per student. No discount for taking other classes.
- There is no discount for CCCS students.

**PAYMENT OPTIONS AND DISCOUNTS FOR ALL CLASSES EXCEPT MODERN III:**

Semester Pricing:      Two Classes per Week:    \$ 315.                      Three Classes per Week:            \$ 475.  
    Four Classes per Week:    \$ 580.

- **The first payment or the full payment is due before classes start January 9, 2017**
- Should you have two children participating in the same class or two different classes, you will be charged the rate for multiple classes per week.
- If you are participating in more than 4 classes per week, please see Arts Enter Executive Director for pricing.

| Day       | Class Description              | Instructor      | Time           | Check each class for enrollment | Price  |
|-----------|--------------------------------|-----------------|----------------|---------------------------------|--------|
| Monday    | Ballet I & II                  | Amanda Riffe    | 5:00 – 6:00 pm |                                 | \$ 175 |
| Tuesday   | Modern I                       | Amy Watkins     | 4:30 – 5:30 pm |                                 | \$ 175 |
| Tuesday   | Modern II                      | Amy Watkins     | 5:30 – 6:30 pm |                                 | \$ 175 |
| Tuesday   | Modern III                     | Amy Watkins     | 6:30 – 8:00 pm |                                 | \$ 250 |
| Wednesday | Technical (lights, sound,sets) | Jenna Rodriguez | 5:30 – 6:30 pm |                                 | \$175  |
| Thursday  | Jazz - Hip Hop                 | Amanda Riffe    | 5:00 – 6:00 pm |                                 | \$ 175 |
| Friday    | Creative Movement              | Amy Watkins     | 4:30 – 5:15 pm |                                 | \$ 175 |
| Friday    | Theatre                        | Wayne Creed     | 5:00 – 6:30 pm |                                 | \$ 75  |
|           |                                |                 | TOTAL(S)       |                                 |        |

# School of Dance FALL / WINTER Registration Form – January 9, 2017

**PLEASE FILL OUT THE ENTIRE REGISTRATION FORM**

## STUDENT INFORMATION:

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

Class: \_\_\_\_\_ Cost: \_\_\_\_\_

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

Class: \_\_\_\_\_ Cost: \_\_\_\_\_

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

Class: \_\_\_\_\_ Cost: \_\_\_\_\_

Name of school(s) student(s) attend: \_\_\_\_\_

## FAMILY INFORMATION:

Parent's Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Guardian's Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please check if our child needs special accommodations due to a medical condition or disability. IF there is anything the Palace or Arts Enter instructors should know regarding your child's condition, please call the office at (757) 331-2787. We need to be aware of any special needs so that you and your child will have a positive experience @ the Palace.

**PARENT AUTHORIZATION:** I hereby give consent for my child to participate in the Arts Enter programs indicated above and all activities and field trips unless I advise you in writing. I further release and agree to indemnify and hold harmless Arts Enter Cape Charles, Inc. and its officers, servants or assigns from any liability concerning my child's involvement in the Arts Enter programs and further agree that the use of all Arts Enter facilities and field trip facilities is made at the risk of the registrant. Every effort will be made to contact a parent/ guardian or contact listed above in the case of emergency. I further give Arts Enter the rights to any photos or videos of my child that are taken during rehearsals, lessons or performances for promotional purposes.

\_\_\_\_\_  
*Parent/ Guardian Signature*

\_\_\_\_\_  
*Date*

**FOR OFFICE USE ONLY**

**Student Name:** \_\_\_\_\_ **Parents:** \_\_\_\_\_

Method of Payment: \_\_\_\_\_ Credit Card: Visa  Master Card  Card#: \_\_\_\_\_

Cash: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVS# \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Check Number: \_\_\_\_\_

Payment Plan:  Date 1: \_\_\_\_\_ Date 2: \_\_\_\_\_ Date 3: \_\_\_\_\_

Amount 1: \_\_\_\_\_ Amount 2: \_\_\_\_\_ Amount 3: \_\_\_\_\_

