

OVATION – SCHOOL OF MUSICAL THEATRE  
Registration 2019-20 Aug.19, 2019 - May 30, 2020

Students Name \_\_\_\_\_ DOB \_\_\_\_\_

Parent's name (if under 18 ) \_\_\_\_\_

Address \_\_\_\_\_

City, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

Class \_\_\_\_\_ Weekly # of Hours \_\_\_\_\_

If you need more space, please use the back of this registration form.

**PAYMENT PLANS** –Please circle

**1) Pay Annual Tuition in Full**

**2) ½ Tuition on Aug.1st , 2019/ second ½ tuition on Jan. 1st. , 2020**

**3) August tuition & 9 Monthly payments due on the 1<sup>st</sup> of each month starting 9/1/19 ending 5/1/20** Automatic payment option available

Total Hours \_\_\_\_\_

Initial Payment Plan Payment \_\_\_\_\_ Aug. \_\_\_\_\_ Sept. - May

Registration fee - **All Students** \_\_\_\_\_ ( \$25.00 per student/ \$35 per family )

Total Amount Paid at Registration \_\_\_\_\_ 1<sup>st</sup> month \_\_\_\_\_ ½ tuition \_\_\_\_\_ full

Signature \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only  
Payment method

\* I choose to give Ovation permission to charge my credit card on file automatically on the 1<sup>st</sup> of the month for the duration of the 2019-20 session.

Check # \_\_\_\_\_  
Date \_\_\_\_\_  
Cash \_\_\_\_\_  
Date \_\_\_\_\_  
Credit# \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

# OVATION – SCHOOL OF MUSICAL THEATRE STUDENT LIABILITY/ AGREEMENT FORM 2019-20

## Terms of Agreement – Please initial each\*

\_\_\_\_ \* I understand that the activities in the performing arts classes as well as performing have inherent risks, and that Ovation - School of Musical Theatre LLC and faculty do not assume any responsibility for injury.

\_\_\_\_ \* I understand that class payments are based on the number of hours chosen.

\_\_\_\_ \* I understand that **Thanksgiving, Winter & Spring Breaks are excluded from payment.**

\_\_\_\_ \* I understand that payments are always due on or before the 1<sup>st</sup> of the month. There is a \$10 Late Fee on payments made after the 5th.

\_\_\_\_ \* **I understand that that registration is for the ENTIRE session.** If I wish to drop a class, I agree to give written notice before the 15<sup>th</sup> of the prior month or I will be billed for the next month. **I understand that there is a \$50 early release fee.**

\_\_\_\_ \* **I understand that all fees and payments are non-refundable and no credit will be given for days missed.** If the Ovation staff is informed we will accommodate students that are sick for a longer period for a verified medical reason. Students who are cast in shows are asked to pay 50% of their tuition to secure their place in class for the time period they will be missing class.

\_\_\_\_ \* I understand that instructors are subject to change and if necessary a class may be cancelled. The student has the opportunity to make up classes with the approval of the staff at Ovation. Storm days will not be made up.

\_\_\_\_ \* I understand that a student whose behavior or conduct is disturbing to the rest of the class may be dismissed from class.

\_\_\_\_ \* I allow Ovation - School of Musical Theatre LLC to photograph myself or my enrolled child for publicity purposes.

Signature \_\_\_\_\_ Date \_\_\_\_\_