

Miss Diana's School of Ballet **2023 Registration Form**

Student Name: _____

Age: _____ Date of Birth: _____ Start Date: _____

Total Enclosed: \$_____ Please make checks **payable to Miss Diana Garrett**

Please write the student's name on all checks. Mail to: Diana Garrett, 4703 Torrey Pines Drive, Medford OR 97504

Parent's Name: _____

Address: _____

Home Phone number: _____ Cell Number: _____

E-mail address (All class/performance information goes out via email)

How did you hear of Miss Diana's? _____

Please initial that you have read the following:

_____ Tuition is due the first of each month.

A late fee of \$10 will be added for any tuition not paid on or before the 7th of each month. Fee increases to \$15 after the 10th.

A \$20 fee will be added for any returned/bounced check.

Full tuition is due each month January through December. Prorated tuition is not given for missed classes and tuition is the same no matter the number of weeks in the month.

Non-attendance paired with no tuition paid by the 15th of the month will result in automatic removal from the class roster. If you wish to drop out from a session, prior notice is requested.

_____ I agree to release Diana Garrett, all instructors of Miss Diana's School of Ballet, The Rogue Valley Mall and all its associates from any and all liability that may occur while participating in classes and any and all performances.

_____ I give Diana Garrett permission to use any photos and/or videos for publicity. Photos & videos are the property of Miss Diana's School of Ballet.

By signing below, I agree to the above statements.

Proper signing of this agreement by a parent or guardian is a condition of participation.

Signed _____ **Date** _____