

Bayer Ballet Academy

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(650) 988-9971 | info@bayerballetacademy.com | www.bayerballetacademy.com

Bayer Ballet Academy Registration Form

Mother's Name

Father's Name

Address

Address

City, ST ZIP Code

City, ST ZIP Code

() _____
Home Phone

() _____
Cell Phone or Other

() _____
Home Phone

() _____
Cell Phone or Other

() _____
Work Phone

E-mail

() _____
Work Phone

E-mail

Company Name:

Company Name:

Matching Gift program?

Matching Gift program?

How did you hear about Bayer Ballet Academy?

Emergency Contacts

Emergency Contact

Doctor's Name

() _____
Home Phone

() _____
Cell Phone

() _____
Cell Phone

() _____
Work Phone

Address

Address

City, ST ZIP Code

City, ST ZIP Code

Student Information

Name

Birth date

Age

Name

Birth date

Age

Name

Birth date

Age

Please read and sign

Ballet is a dance discipline which often requires physical contact between teacher and child. By signing this form I acknowledge and accept this method of teaching. Ballet is physically demanding and children should be in good health to take class. I know that Bayer Ballet Academy does not provide health insurance and I agree not to make any legal claims against the school regardless of the source of any injury. In any medical emergency, in the absence of the parents, medical help will be sought and I agree to be financially responsible for any charges. Bayer Ballet Academy is not responsible for lost or stolen articles. Bayer Ballet Academy performance functions and classes may at any time be photographed or filmed and I hereby release the use of these materials to the discretion and ownership of Bayer's Bayer Ballet Academy. I have read and agree to all of these policies and so sign this document.

Registration Fee: _____ Tuition: Payment (Plan I) _____ or Payment (Plan II) _____ or Payment (Plan III) _____

Registration & tuition fees are non-refundable

Parent's/Guardian's Signature

Date

For Office Use Only

Placement class (date/time)

Class Placement