



## Summer Schedule 2022 July 11<sup>th</sup> - July 28<sup>th</sup>

<b>Studio A Monday</b>	<b>Studio A Tuesday</b>	<b>Studio A Wednesday</b>	<b>Studio A Thursday</b>
Ballet	Ballet	Ballet	Ballet
4:30-7:30 INTENSIVE BALLET	4:30-5:30 age 3-4 BEG	4:30-7:30 INTENSIVE BALLET	4:30-5:30 age 6-7 BEG
	5:30-6:30 age 5 BEG		5:30-6:30 Age 8-11 BEG
	6:30-7:30 Age 12 + BEG		6:30-7:30 ADULT BEG
	7:30-8:30 Age 12 + INTERM/ADVANCED		7:30-8:30 Age 12 + INTERM/ADVANCED

**Bayview School of Ballet Inc.  
Summer Registration Form**

**(A) General Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone Number #1 \_\_\_\_\_ Phone Number #2 \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Date of Birth (day /mm/ year) \_\_\_\_\_ Age \_\_\_\_\_

**(B) Class Assignment**

Days	Time	Teacher
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

**Total Amount \$** \_\_\_\_\_

(C) CREDIT CARD M/C \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EXP \_\_\_\_\_ / \_\_\_\_\_  
 (D) CREDIT CARD VISA \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EXP \_\_\_\_\_ / \_\_\_\_\_

**Signature** \_\_\_\_\_

Bayview School of Ballet Inc. is a professional school and requires its students to be committed to its high standards of training and attendance. The faculty recognizes that not every student who studies ballet has professional aspirations, but it is our objective to provide professional training that will permit all students the option of that choice. Bayview School of Ballet Inc. has an exceptional staff of highly trained professional teachers. All decisions of Bayview School of Ballet Inc. are made in the best interest of our students. All placement and creative decisions are at the discretion of our staff and are final.

**Refunds- All school fees are non-refundable**

○ **Signature** \_\_\_\_\_

**(E) Agreement**

I, the undersigned, understand and agree to the class and payment schedule above, specified by Bayview School of Ballet Inc. I, the undersigned, understand that Bayview School of Ballet Inc. does not assume or accept liability for expenses resulting from injuries sustained in any school activity whatsoever, whether on or off school premises.

Date \_\_\_\_\_

Print Name \_\_\_\_\_  
 Last Name \_\_\_\_\_