

2020-21 JUNIOR DIVISION REGISTRATION FORM



Student Name _____ DOB _____ Age _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Parent/Guardian Cell Phone _____

Mother & Father / Legal Guardian Full Name (s) _____

Student's Address and Phone is: *(please circle one)* Mother's _____ Father's _____ Both Parents' _____

Other: _____

Primary Parent/Legal Guardian Contact Email _____

Any known allergies or medical issues? _____

Emergency Contact Name (in case Parent/Guardian is unavailable) _____ Cell Phone _____

Tuition Payment Options - Select one		
<i>Payments made in installments will have a \$10 per installment fee added. Rates below <u>include</u> installment fees.</i>		
Payment Options	Junior 1	Junior 2
One full payment due Aug 17 th	<input type="checkbox"/> \$1,310.00	<input type="checkbox"/> \$1,480.00
Two equal installments due Aug 17 th , Jan 4 th	<input type="checkbox"/> \$665.00	<input type="checkbox"/> \$750.00
Four equal installments due Aug 17 th , Oct 5 th , Jan 4 th , March 8 th	<input type="checkbox"/> \$337.50	<input type="checkbox"/> \$380.00

☐ I have already reserved my dancer's spot via the website. The \$50 credit can be removed from my first tuition payment.

By signing below, I acknowledge that I have read and understand all of the above information:

Student Name _____

Parent/Guardian Name(s) _____

Parent/Guardian Signature(s) _____ Date _____

CMB offers financial aid. Contact the office for more information.

POLICY FORM – please initial where indicated



PAYMENTS

- Tuition is due on dates as stated on registration form. Unless other arrangements have been made through the office in writing, payments not received by the due dates will have a \$10/wk fee added for each week payment is not received. If payment has not been received, or alternate arrangements made, by three weeks after my due date, my dancer will be removed from roster.
- I understand that my account will be charged a \$25 NSF fee for any returned checks.
- If my dancer withdraws from classes, for any reason, unless other arrangements have been made in writing, payment is still due for remainder of tuition.
- I acknowledge that if in-studio classes are interrupted due to Covid, CMB will do its best to modify programming, but tuition is still due according to registration form.

____ INITIAL HERE

MEDIA RELEASE

- CMB may, from time to time, take video and/or photographs of my dancers. We may use these for publicity purposes such as but not limited to: the website, Facebook, and news releases.
- We respect our families' privacy. If you have special circumstances please bring these to the attention of the office.

____ INITIAL HERE

LIABILITY ACKNOWLEDGEMENT

- CMB is not responsible for any injury or illness to my dancer while participating in any program sponsored by CMB. I release and indemnify CMB from any claim, damage, or suit whatsoever which may arise from personal injury, illness, or property damage suffered while at CMB.
- I have read the appropriate County orders regarding Covid 19.
- I understand I am solely responsible for determining if my child meets any medical, mental, or otherwise specified requirements for not wearing a mask while participating in CMB programming.
- I understand that in accordance with County directives, CMB will assume that anyone not wearing a mask has a valid reason for making that decision and that CMB will enforce a zero tolerance policy for expressing judgements about the wearing or not wearing of a mask.
- I understand that CMB instructors may, at their discretion, adjust the content of classes (lower level of difficulty, more frequent breaks, etc.) to accommodate the breathing issues caused by masks.
- I understand that CMB will operate all programming in accordance with current County directives, which may result in programming adjustments during the course of the 2020/2021 academic year.
- I understand that CMB follows the CDC guidelines on ending home isolation after positive COVID test.

____ INITIAL HERE

POLICY HANDBOOK

- I acknowledge that I have read, understand and agree to all of the policies listed in the Policy Handbook on the CMB website (www.cmballet.org).

____ INITIAL HERE

FAMILY REGISTRY

The Family Registry is an optional list of families and the contact information you wish to share, which has proven useful in knowing families in your area for organizing carpools, etc. The student's name, level, city, and parent's first names will be shared as well as any other information you choose to include below.

I would like to include the following additional information in the CMB Family Registry:

- ☐ Address ☐ Phone ☐ Email ☐ Check here if you do not wish to be included at all in the Registry

By signing below, I acknowledge that I have read, understand and agree to all of the policies listed above.

Parent/Guardian Signature

Date

Welcome to the CMBA Volunteer Guild

Please check those activities with which you would be willing to assist:

Costumes

- ☐ *I am willing to serve as a coordinator*
- ☐ Ironing and steaming
- ☐ Sewing hooks and eyes
- ☐ Simple alterations like hems
- ☐ More advanced costume creation

Other

- ☐ I am interested in joining the Board of CMB
- ☐ I would like to volunteer in the following ways:

Studio Upkeep

- ☐ *I am willing to serve as a coordinator*
- ☐ Greeter for front desk
- ☐ Vacuuming
- ☐ Light cleaning
- ☐ Small maintenance jobs
(e.g. changing light bulbs)

Contact Information

Name

Phone

Email

Your contact information may be shared with other members of the volunteer guild.

- ☐ Please do not share my contact information without my consent

Note: The rules and policies in the CMB Policy Handbook apply to participation in the CMB Volunteer Guild. The handbook is available on the CMB website, www.CMBallet.org.

Performances

- ☐ *I am willing to serve as a coordinator*
- ☐ Usher
- ☐ Load in and out
- ☐ Backstage help
- ☐ Concession stand
- ☐ Clean up after final performance

Special Events

- ☐ *I am willing to serve as a coordinator*
- ☐ Planning
- ☐ Marketing
- ☐ Host Event
- ☐ Cook food/ treats