



INTERNATIONAL BALLET ACADEMY

ARTISTIC DIRECTOR | VERA ALTUNINA

REGISTRATION FORM

An annual school-year Registration Fee of \$35 is due at time of registration.

NAME _____ Birthdate _____ AGE _____ GRADE _____
(Student) (Month/Day/Year of birth) (16-17 school year)

PRIMARY ADDRESS _____ SCHOOL _____
(or Preschool if applicable)

CITY _____ STATE _____ ZIP + 4 _____

HOME PHONE _____ *STUDENT CELL PHONE _____

*STUDENT EMAIL (if available): _____

Father/Guardian Information

Name _____

Address _____

City/State/Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email* _____

Mother/Guardian Information

Name _____

Address _____

City/State/Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email* _____

*NOTE: All information will be kept private and used exclusively by IBA and IBT, and will not be shared, traded OR rented. (Please add info@intballetacademy.org to your contact list)

Emergency Contact Name: _____ Em. Phone: _____

Relationship: _____

- I understand that:
- (1) All payments are non-refundable.
 - (2) I am committing to attendance and fees for a full 19-week semester of classes (See Student Manual for details).
 - (3) Students must follow all school policies and regulations as stated in the Student Manual.
 - (4) Personal accident insurance is the responsibility of each student. The IBA and its faculty shall not be held responsible for any injuries that occur while studying at the school.
 - (5) I give permission for International Ballet Academy to take photos of my daughter or son to use for purposes of promoting the school.

Parent or Guardian Signature _____ Date _____

Rev: 5/26/16

Please tell us how you learned about our school: _____

===== **For Office Use Only** =====

Date of Registration: _____ Registration Fee: \$35 Pmnt Type: _____

Payments

1 st Semester	Pmnt Amt	Pmnt Type	Notes	2 nd Semester	Pmnt Amt	Pmnt Type	Notes
Full Pmnt	\$			Full Pmnt	\$		
Sept	\$			Feb	\$		
Oct	\$			Mar	\$		
Nov	\$			Apr	\$		
Dec	\$			May	\$		
Jan	\$			Jun	\$		

1st Semester Classes _____

Class	Mon	Tues	Wed	Thu	Fri	Sat
Dance with Me						
3yr Ballet/Tap						
4yr Ballet/Tap						
5yr Ballet/Tap						
6yr Ballet/Tap						
Ballet I						
Ballet II						
Ballet III						
Ballet IV-B						
Ballet IV-A						
Ballet V						
Ballet VI						
Ballet VII						
Pas de Deux/ Contemporary						
Char/Flam/TD I						
Char/Flam/TD II						
Char/Flam/TD III						
Int/Adv Ch/FI/TD						
Jazz I						
Jazz II						
Jazz III						
Jazz IV						
Jazz V						
Int/Adv Jazz						
Modern I						
Modern II						
Modern V						
Int/Adv Mod						
Tap I						
Tap II						
Tap IV-V						

2nd Semester Classes _____

Class	Mon	Tues	Wed	Thu	Fri	Sat
Dance with Me						
3yr Ballet/Tap						
4yr Ballet/Tap						
5yr Ballet/Tap						
6yr Ballet/Tap						
Ballet I						
Ballet II						
Ballet III						
Ballet IV-B						
Ballet IV-A						
Ballet V						
Ballet VI						
Ballet VII						
Pas de Deux/ Contemporary						
Char/Flam/TD I						
Char/Flam/TD II						
Char/Flam/TDIII						
Int/Adv Ch/Fla/TD						
Jazz I						
Jazz II						
Jazz III						
Jazz IV						
Jazz V						
Int/Adv Jazz						
Modern I						
Modern II						
Modern V						
Int/Adv Mod						
Tap I						
Tap II						
Tap IV-V						

Trial Class Date: _____ **Type:** _____ **Fee:** \$20 **Pmnt Type:** _____

Trial Class Date: _____ **Type:** _____ **Fee:** \$20 **Pmnt Type:** _____

Placement Class Date: _____ **Type:** _____ **Fee:** \$35 **Pmnt Type:** _____