

1124 Corporate Drive • Holland, Ohio 43528 • 419 861-0895 website: www.ballettheatreoftoledo.org · email: info@ballettheatreoftoledo.org

## Summer Classes – 2017 JUNE 12<sup>th</sup> – JULY 27th (6 weeks) BTT is closed the week of July 3rd

\*\*\*\*\*Class placement for Summer remains the same as Spring 2017\*\*\*\*\*

Monday 5:00-6:15 Advanced & above 6:15-7:15 Advanced pointe & above 7:15-8:15 Adult Int/Advanced

5:15-6:15 Intermediate 1 6:15-7:15 Elem 1 & 2

Tuesday 10:00-11:00am Adult Inter

	5:15-5:45 Creative Mvmt	
5:00-6:15 Advanced & above	5:45-6:30 Prep & Prim 1	5:00-6:15 Inter 2
6:15-7:15 Adv pointe & above	6:30-7:15 Prim 2	6:15-7:15 Pointe 1

Wednesday CLOSED

Thursday 5:00-6:15 Advanced & above 6:15-7:15 Advanced pointe & above 7:15-8:15 Inter 1 & Elem 2

5:00-6:15 Intermediate 2 6:15-7:15 Pointe1 7:15-8:15 Adult Beginner/Intermediate

## **Registration & Tuition due May 31st**

One class per week	\$96
Two classes per week	\$186
Three classes per week	\$270
Four classes per week	\$336
Five classes per week	\$390
Six classes per week	\$468
Drop-in rate	\$17 per class

Family Discount: 15% per additional student. The discount applies to the lesser tuition rate Boy's scholarship rates apply for summer classes if they participated in productions.

**Basic Policies** 

Students must be registered for Technique class to attend Pointe. Classes may be cancelled or combined based on enrollment.

Dress Code: Same as Fall and Spring. Consult with office or staff personnel

Make-ups: All missed classes must be made up within the same semester. If there has been serious illness or injury, please contact the office about carrying classes into the next semester/session.

Late arrivals: Any student arriving 10 minutes after class has begun may be asked to sit and observe. The risk of injury increases significantly when early warm-up exercises have been missed.

Refunds: None.

Placement: BTT faculty determines class placement levels for all students



## **2017 Summer and Pre-Fall Registration**

tudent Information				
Name	Date of Birth/Age			
Address	City	State	Zip	
<i>Phone</i> #	Family email a	ddress		
Parent Information		Home/Cell above		
	Home/Cell phone			
<i>Parent #2</i>		Home/Cell phon	e	
elect one:				
Summer Classe	es June 12 <sup>th</sup> -July 27 <sup>th</sup>	Pre-Fall Class	es July 31 <sup>st</sup> -August 31 <sup>st</sup>	
<u>Classes</u> Lavel	Day	Time		
	Day			
Level	Day	<i>Time</i>		
TOTAL \$				
Method of payment: cay	sh check	credit card		
We accept the following	credit cards: Visa, Mastero	card and Discover.		
Name on the card	Credit Card #			
Expiration Date	Verifica	tion Number		

## Allergies

<u>Please read the following</u>: I am aware that ballet dancing, stretching and other activities associated with your participation, places unusual stress on the body and carry with it the risk of physical injury. On behalf of my child and myself, I assume the risk and agree that the Ballet Theatre of Toledo, its Board of Trustees, the faculty, volunteers, and any of the chaperones and agents of the Ballet Theatre of Toledo shall not be liable in any way and released for any injuries sustained during attendance at the school or any of its related functions for any act which might constitute a claim for negligence. I further understand that my child, at all times, is responsible for his/her personal belongings and I accept full responsibility for loss of personal items whether lost, damaged or stolen. Parent or Guardian signature \_\_\_\_\_ Date \_\_\_\_