## 2019/2020 Registration Form



## Classes/Workshops at ESO Arts Center

\*Payment in full is due at the first of the month

Return Form to PO Box 147 Belle Haven, VA 23306 Or ESO PRIOR to Class Start

Student Name	Birth Date	Age
Billing Address		
If student is under 18:		
*Parent 1 Name	Cell Phone	
E-mail Address		
*Parent 2 Name	Cell Phone	
E-mail Address		
*At least 1 parent info is require	ed. BOTH ARE REQUIRED if 2 or more part	ies are paying for classe
Does the student have any health co	onditions we should know about?	
No Yes		
understand a 30-day written notice mu office in the case of dropping a class, or the 10th of the month, statements with lo a \$30 service fee charged on all retur attended in which the instructor was through the instru I have read and agree	Tuition Agreement Into until notification of withdrawal to BOTH the state of the given to ESO in the form of a letter to be not continuing lessons. Payments are due of the fees may be sent to the addresses on file med checks. I understand there will be no do not notified of at least 24 hours prior. Makewater, at the instructor's discretion and scheet to the 2019/2020 Payment Policies and Pro-	both the instructor and the on the 1st of the month. Afte a. I understand there will be eductions for classes not up classes are arranged dule.
CLASS PAYMENTS:		
CLASS NAME	TUITION	
CLASS NAME	TUITION	
ANNUAL REGISTRATION FEE (1 TIME FEE, V	ALID July 1 to June 30)	-\$15
	TOTAL*	

## **Payment Options**

Payment is accepted in cash, credit or debit (3.5% additional processing fee will be applied), online through the website (3.5% additional processing fee will be applied) or check payable to ESO Arts Center. Payments may be made anytime online, dropped in the drop box in the ESO Office, in the Office Monday-Thursday from 11AM-6PM, or via mail at PO Box 147, Belle Haven, VA 23306.

I understand that instructors at ESO Arts Center are independent of the classes I take until I pay my tuition.	pendent contractors and will not be paid
If additional contracts are required (Ballet, Music, Fitnes	s), they are completed and attached.
I wish to have my credit card charged automatically whomonth, or the 1st Business Day of the month.	nen payment is due on the 1st of the
I have attached a completed Credit Card Authorization	n Form.
Release from Liabilian I, the student or undersigned adult/guardian/parent,recognizing that classes involving physical activity may resurd ischarge, and agree to hold harmless and safe from any conficers, agents, employees and independent contractors fractions and clauses of actions arising out of said business, splitness and related classes, practices and performances, or any and all known and unknown personal injuries and propidamage, which I may now or hereinafter have as the students.	It in personal injury, do hereby release, and all liabilities ESO Arts Center, its from any and all claims, demands, rights, pecifically including dance, karate, adult account of or in any way arising out of verty damage, including consequential
Signed (Student/Parent/Guardian)	Date
Photographic Release I give permission for photographs of my child, or myself, in a promotional materials for ESO Arts Center and subsequent of the control	class or performance, to be used in classes in both web and print publications
Signed (Student/Parent/Guardian)	Date
Office hours are Monday- Thursday from 11AM Phone: 757-442-322 www.esoartscenter.  Ashleigh Maggard, Executive Ashley Antunes, Assistant Margaret James, Office &	<b>26</b> org ve Director Director
FOR BALLET STUDENTS ONLY  Productions fees are due no later than OCTOBER AND For Production costuming purposes, please provide the following Dress size (S, M, L, etc.) Shoe size Leotard size Tight size Permission to ride with*:	•

\*If there is a change in ride permissions, please notify Dana Floyd Please note that hair should be worn up for all classes, preferably in a bun (bun mandatory for Levels 3 and up). No jewelry is to be worn, and no cell phones are allowed in class.