



Cleveland City Ballet Bang A Rang Productions
 445 Church Street SE Suite 2201
 Cleveland, TN 37311
 Phone 423-472-0167
 www.clevelandcityballet.com

Registration Form

School Year _____

Date _____

Fee Paid _____

Received By _____

| | | | |
|-------------------------|--|------------------|-------|
| Student's Name | | Mailing Address | |
| Age | | | |
| Date of Birth | | Telephone Number | |
| Grade Level | | | |
| Allergy/Health Concerns | | | |
| Mother's Name | | Cell Phone | Email |
| Father's Name | | Cell Phone | Email |
| Emergency Contact | | Cell Phone | |

Disclaimers:

Class sizes are limited and placement in class will not be reserved until formally registered. Your signature is an acceptance of financial responsibility for this commitment and withdrawal is only by written notice and no refunds will be given. You are responsible for recital and costume fees for participation in the spring recital. If you chose not to participate, written notice must be received by 11/30.

| |
|------------------|
| Signature / Date |
|------------------|

Release:

By enrolling my child, I understand my child's picture may be taken. I also understand that their picture may be used in CCB publications (brochures, website, etc.). No child will be identified by name in any publication.

| |
|---------|
| Initial |
|---------|

As the parent or legal guardian of this child, I give my permission for staff and representative of Cleveland City Ballet to administer necessary first aid, and/or take the child to a medical facility for treatment. I understand every effort will be made to contact me and/or emergency contact listed if any treatment is necessary. I also release and discharge CCB and their staff and representatives from all liability of any kind from claim, demand or cause of action which might be asserted on behalf of said child as a result of participation in this activity.

| |
|---------|
| Initial |
|---------|

Please check your class preference below. Class placements are at the teacher's discretion and may require an assessment regardless of prior training. All classes listed below may not be offered each semester based on enrollment.

| Class | Suggested Ages | Check | Class | Suggested Ages | Check |
|-------------------|-------------------|-------|----------------------|----------------------|-------|
| Creative Movement | 3 | | Tiny Tap | 4-6 | |
| Pre Ballet I | 4 | | Tap I | 7 | |
| Pre Ballet II | 5 | | Tap II | 8 | |
| | | | Tap III | 9 | |
| Ballet I | 7 | | Tap IV | 10 | |
| Ballet II | 8 | | Intermediate Tap | Teacher Placement | |
| Ballet III | 9 | | Advance Tap | Teacher Placement | |
| Ballet IV | 10 | | | | |
| Ballet V | Teacher Placement | | Company | Audition / Placement | |
| Ballet VI | Teacher Placement | | Intro Pointe | 10 and up | |
| Ballet VII | Teacher Placement | | Pre/Beginning Pointe | Teacher Placement | |
| Jazz I | 7 | | Pointe | Teacher Placement | |
| Jazz II | 8 | | | | |
| Jazz III | 9 | | Acro | 6 and up | |
| Jazz IV | 10 | | | | |
| Intermediate Jazz | Teacher Placement | | Contemporary | 9 and up | |
| Advance Jazz | Teacher Placement | | Modern | 9 and up | |
| | | | | | |
| Musical Theater | 9 and up | | Hip Hop | 8 and up | |

For Office Use Only

| | | |
|-----------|--|--|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |
| Saturday | | |