



**SPRING 2011 REGISTRATION FORM**  
**SESSION DATES: JAN 3 TO JUNE 11**

217 Park Avenue  
 Barrington, IL 60010  
 847-682-9601

**Student's Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Birthday** \_\_\_\_\_

(One form per student)

**Parent Names** \_\_\_\_\_

**Street address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home** \_\_\_\_\_ **Cell** \_\_\_\_\_ **Work** \_\_\_\_\_

**Other** \_\_\_\_\_

**Email 1** \_\_\_\_\_ **Email 2** \_\_\_\_\_

**Experience/Goals** \_\_\_\_\_

**Notes** \_\_\_\_\_

**How did you hear about us?** \_\_\_\_\_

VOICE	TIME	DATES	TUITION	TOTALS
PRIVATE STUDY	MON—SAT		\$60 hour	
MUSICAL THEATRE & POP STYLES PERFORMANCE PRACTICE	TUES 6:00—7:00 PM	1/25, 2/22, 4/19, 5/17 No class in March	\$120 session \$30/class	
VOCAL PERFORMANCE	WED 7:00—8:00 PM	1/26, 2/23, 3/30, 4/27, 5/25	\$150 session \$30/class	
DEMO PROJECT	MON—SAT	Coaching sessions, recording: TBA	\$275	
<b>PIANO</b>				
PRIVATE STUDY	MON—SAT		\$60/hr	
MASTER CLASS	MON 6:00—7:00 PM	1/10, 2/7, 3/7, 4/4, 5/2	\$150 session \$30/class	
PIANO PERFORMANCE PRACTICE	TUES 6:00—7:00 PM	1/11, 2/8, 3/8, 4/5, 5/3	\$150 session \$30/class	
			<b>SUB-TOTAL</b>	

THEATRE	TIME	DATES	TUITION	TOTALS
PHOTO SHOOT AND RESUME WORKSHOP	1½ hr photo shoot ½ hr class	On demand, date and time TBA	\$250	
AUDITION WORKSHOP	2 hr class	On-demand, date and time TBA	\$100	
SHOW-STOPPERS	1 hr class	On-demand, dates and time TBA 8 weeks	\$240	
BROADWAY BOUND	1 hr class	On-demand, dates and time TBA 8 weeks	\$240	
COMEDIC AND DRAMATIC MONOLOGUES	1 hr class	On-demand, dates and time TBA 8 weeks	\$240	
PRIVATE COACHING	MON—SAT		\$60/hr	

### STUDIO POLICIES

- \* Each student must submit a signed registration form prior to their first lesson or class.
- \* In fairness to everyone, students with a regularly scheduled lesson time are committing to that time for the duration of a session. We will do our best to accommodate major schedule changes during each registration process.
- \* Up to two private lessons may be rescheduled within the same session if 48-hr. notice is given (exceptions are made for sudden illness). Lessons and classes will always be rescheduled if cancelled because of inclement weather or instructor illness. There are no make-ups or refunds for classes missed by an individual.
- \* Any student who wishes to cease private study must give at least two weeks notice. Outstanding balances are due immediately.
- \* Private lessons, master classes, and performance practice classes may be billed monthly or tuition can be paid in full before the session begins. Monthly payments are due on the first of every month. A late fee of \$10 will be added to an invoice if payment is not received before the 15th. The studio accepts personal checks, Visa, and MasterCard.
- \* All theatre classes must be paid for in full prior to the first day of class. Tuition and materials are non-refundable unless the class is cancelled.
- \* Returned checks are subject to a \$25 fee.

<b>SUB-TOTAL SIDE 2</b>	
<b>SUB-TOTAL SIDE 1</b>	
<b>TOTAL</b>	

### IMPORTANT DATES

- \* AIM theory exams, Level III-XII, Harper College: Jan 30
- \* AIM performance exams, Level III-XII, Harper College: Mar 6
- \* Showcase and awards ceremony, Village Church of Barrington: Mar 12
- \* Spring break, studio closed: Mar 18-27
- \* Easter holiday, studio closed: April 22-23
- \* Summer session begins: June 13

### LIABILITY WAIVER

I hereby release Bel Canto Studios, its agents and employees from all liability for personal injury, illness, or property damage occurring on or off the studio premises. I have read the registration information and understand the studio's policies as outlined above. I understand that I am responsible for tuition payments as described. I hereby give Bel Canto Studios permission to use photographs, audio recordings, or video clips of me/my student for promotional purposes. I authorize Bel Canto Studios' employees to call paramedics and discharge me/my student to an ambulance if I am not able to authorize it in the case of a medical emergency.

Student Signature (18 or older)

Parent/Guardian Signature

Date

\_\_\_\_\_

### CREDIT CARD PAYMENTS

Type: \_\_\_ Visa \_\_\_ MC Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_ Security Code: \_\_\_\_\_

Please charge the following amount to this card: \$ \_\_\_\_\_ Please set up monthly payments using this card \_\_\_\_\_ (initials)

Name on Card: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

\_\_\_\_\_ DATE \_\_\_\_\_ ID \_\_\_\_\_ OL \_\_\_\_\_ QB \_\_\_\_\_ INV \_\_\_\_\_ CAL \_\_\_\_\_ RSTR \_\_\_\_\_ ADBK \_\_\_\_\_ EM DIST \_\_\_\_\_ MAIL LIST \_\_\_\_\_ PH \_\_\_\_\_ FILE