



**SPRING 2017 REGISTRATION FORM**  
**SESSION DATES: JAN 9 TO JUNE 10**

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

Student Name \_\_\_\_\_ Age \_\_\_\_ Bday \_\_\_\_\_ School \_\_\_\_\_

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

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

Mom Cell \_\_\_\_\_ Dad Cell \_\_\_\_\_ Student Cell \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_

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

Payment Method \_\_\_\_\_

Experience \_\_\_\_\_

Goals \_\_\_\_\_

Notes \_\_\_\_\_

How did you hear about the studio? \_\_\_\_\_

PRIVATE STUDY— MON—SAT \$60 HR		
VOICE		
PIANO		
ACTING		
PUBLIC SPEAKING		
PERFORMANCE CLASSES		
VOCAL PERFORMANCE	SUN 4:00—5:00 PM	1/15, 2/12, 3/12, 4/9, 5/7 \$125 if paid in full before first class or \$30 per month
MUSICAL THEATRE & POP STYLES	SUN 3:00—4:00 PM	1/15, 2/12, 3/12, 4/9, 5/7 \$125 if paid in full before first class or \$30 per month
PIANO MASTER CLASS	SUN 2:00—3:00 PM	1/15, 2/12, 3/12, 4/9, 5/7 \$125 if paid in full before first class or \$30 per month
IDOL INTENSIVE	SAT 4:00—5:00 PM	2/4—3/18, 6 wks, \$150 No class 2/18



<b>THEATRE CLASSES - 6 weeks, \$150</b>		
<b>BROADWAY BOUND</b>	SAT 11:00 AM—NOON	4/8—5/13
<b>WINNING MONOLOGUES</b>	SAT 11:00 AM—NOON	2/4—3/18 No class 2/18

**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 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 cash, personal checks, Visa, MasterCard, and Discover.
- \* All theatre classes and intensives 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.

**IMPORTANT DATES**

- \* BHS Musical "Anything Goes": Feb 23—26
- \* District 220 Speech Tournament: Mar 4
- \* BHS Experimental Play: Mar 16—18
- \* Barrington Idol: Mar 22
- \* Spring Break: Mar 27—Apr 1
- \* SMS Musical: Apr 20—23
- \* BHS Mainstage Play: Apr 27—29
- \* PMS Spring Play: May 4—7
- \* Annual Showcase and Awards: Barrington Area Library, Tentative Date May 21
- \* Memorial Day, Studio Closed: May 29
- \* Last Day for Make-Ups: June 10
- \* Summer Session: June 13—Aug 17
- \* Studio's 15 Year Anniversary: June 26

**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 quotes, 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 — VISA, MASTERCARD, DISCOVER**

Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

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

Address: \_\_\_\_\_

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

<b>OFFICE USE ONLY</b>																					
_____	DATE	_____	ID	_____	OL	_____	QB	_____	TRIAL INV & CAL	_____	INV	_____	CAL	_____	RSTR	_____	DL	_____	CC	_____	FILE