



BALLET BELLEVUE  
 Ballet Bellevue School  
 204 100<sup>th</sup> Ave NE  
 Bellevue, WA 98004  
 425-455-1345  
[www.balletbellevue.org](http://www.balletbellevue.org)

**Registration Form School Year 2009/2010**

Student First Name: \_\_\_\_\_ Student Last Name: \_\_\_\_\_

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Age at Registration: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Annual BBS Registration:** \$20 (\$30 family maximum)  
**Tuition (Youth Programs):** Full year payment by September 21 earns 20% discount.  
 5-payment plan due first class of September, November, January, March, May to avoid 5% late fee.  
*waiver of registration for tuition paid by July 15<sup>th</sup> (full year or payment #1)*  
**A \$40 fee will be charged for returned checks.**

*I understand that all registration and tuition fees are non-refundable and that enrollment for youth programs extends from date of registration through end of school year.*

I freely and knowingly assume all risks incidental to participating in BALLET BELLEVUE and Ballet Bellevue School and I hereby waive any rights, claim or course of action against BALLET BELLEVUE and Ballet Bellevue School, their officers, directors, employees or agents, releasing them from any liability arising out of an injury, direct or indirect. I also give my permission to be photographed/videotaped and allow BALLET BELLEVUE and Ballet Bellevue School to release said photos/videos for publicity and fundraising purposes.

Signature: \_\_\_\_\_  
 (parent/guardian if under age 18)

Today's Date: \_\_\_\_\_

FOR STUDENTS UNDER AGE 18: PARENTS' FIRST AND LAST NAMES

\_\_\_\_\_  
 (Please print)

\_\_\_\_\_  
 (Please print)

How did you hear of BB/BBS? \_\_\_\_\_



