

\_\_\_ **new student** (can register at Open House or after)    \_\_\_ **returning student** (can pre-register)

## Oconee Youth School of Performance '11-'12 Registration Form

**Student's Name:** \_\_\_\_\_ **M / F**    **Birthdate:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Age (as of Sept. 1):** \_\_\_\_\_ **Grade 11-12:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Student's Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Home phone (\_\_\_\_\_)** \_\_\_\_\_

### Parent # 1

**Name:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Cell #:** (\_\_\_\_\_) \_\_\_\_\_ **Work # (\_\_\_\_\_)** \_\_\_\_\_

### Parent # 2

**Name:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**Cell #:** (\_\_\_\_\_) \_\_\_\_\_ **Work # (\_\_\_\_\_)** \_\_\_\_\_

Please print the email address below where you wish to receive your account statements and important info.

**NAME:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**Emergency contact/relationship:** \_\_\_\_\_ / \_\_\_\_\_

**Best phone # to reach emergency contact (\_\_\_\_\_)** \_\_\_\_\_

**Please list any special needs/disabilities:** \_\_\_\_\_

**For those who are pre-registering, please write down the class(es) you would like to take.**

**Class # 1 (Class/Day/Time)** \_\_\_\_\_ **Class # 2 (Class/Day/Time)** \_\_\_\_\_

**Class # 3 (Class/Day/Time)** \_\_\_\_\_ **Class #4 (Class/Day/Time)** \_\_\_\_\_

*I have read and understand all policies including payment policies/studio policies & dress code.*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(parent or legal guardian)

**TO PRE-REGISTER: Send a check with your one-time \$35 annual registration fee (per child) plus the 1<sup>st</sup> of 9 monthly payments.** The remaining 8 payments can be paid monthly by check or we can set you up on a monthly credit card billing plan (see below). If paying annually, see tuition table for your discounted tuition total. Please mail forms to **OYSP, 1050 Jamestown Blvd. Watkinsville, Ga. 30677.**

**YES! Simplify my billing! No late charges ever! Automatically charge my credit card for:**

\_\_\_\_\_ Tuition **monthly** (charges will be assessed on the 1<sup>st</sup> of each month Sept.-April)

\_\_\_\_\_ Tuition **annual** (charges will be assessed on Sept. 1<sup>st</sup>). **Save 5 %.**

\_\_\_\_\_ Costume fees & recital fee as they are due (see policies for dates).

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_ **Exp Date:** \_\_\_\_\_

Type of card (please circle one)    **VISA**    **MASTER CARD**    (The only cards we can accept)

\_\_\_\_\_ **No thanks. I will pay by check.** I plan to pay (circle one) monthly    annually

I understand a late fee of \$15 will be charged if monthly tuition is not paid by the 10<sup>th</sup> for every month it is late.