



837-D ROCKVILLE PIKE | ROCKVILLE, MD 20852 | WWW.MUSICALTHEATERCENTER.ORG | 301.251.5766 | 301.251.5799 FAX

PLEASE PRINT CLEARLY. USE A SEPARATE FORM FOR EACH STUDENT.

female  male  returning student with new address

Student name \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade (Sep. 2011) \_\_\_\_\_

Academic school \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_

Alternate phone \_\_\_\_\_

e-mail \_\_\_\_\_

Person(s) responsible for tuition \_\_\_\_\_

Contact \_\_\_\_\_

Relationship to student \_\_\_\_\_

Cell phone \_\_\_\_\_ work \_\_\_\_\_

Employed by \_\_\_\_\_

Job title \_\_\_\_\_

Contact \_\_\_\_\_

Relationship to student \_\_\_\_\_

Cell phone \_\_\_\_\_ work \_\_\_\_\_

Employed by \_\_\_\_\_

Job title \_\_\_\_\_

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

Class title	Section	Day/Time	Tuition
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
<b>Sub-total</b>			<b>\$ _____</b>
I would like to contribute \$10 to the MTC Scholarship Fund			\$ _____
<b>TOTAL</b>			<b>\$ _____</b>

Semi-Private Voice requests - Please specify as many options as possible so we have a better chance to offer you a slot. Also, when requesting voice, we will be calling you to coordinate a time slot. We would appreciate several different phone numbers where we can reach you day and evening.

Day \_\_\_\_\_ Time \_\_\_\_\_ Instructor \_\_\_\_\_

Day \_\_\_\_\_ Time \_\_\_\_\_ Instructor \_\_\_\_\_

Day \_\_\_\_\_ Time \_\_\_\_\_ Instructor \_\_\_\_\_

**How to pay:**

Check  Visa/Mastercard/AmEx/Discover

# \_\_\_\_\_ Exp \_\_\_\_\_ Billing address if different \_\_\_\_\_

You may select a **two (2) payment plan for semester classes**. At time of registration 50% of tuition is due plus a \$25 administrative fee. The second payment is due February 25, 2012.

Limited financial aid is available. Call 301-251-5766 to receive forms. Forms must be received by 1/2/12.

**Refunds for Classes**

- If you wish to cancel your registration before the first class meets, your tuition will be returned, less the \$35 administrative fee.
- *After the session begins, a request for refund, which must be made in writing, will be honored if the class has met only twice. There will be a charge for the two classes plus the \$35 administrative fee.*
- *Once the third class has started, there will be NO tuition refunded or credit given except for medical reason with a doctor's notification. Refunds will be prorated from the date MTC receives the doctor's notification.*
- Approved refunds take 6-8 weeks. All payments, but cash, will be returned in form made (cash payers will receive a check).
- MTC reserves the right to cancel any class with insufficient registration. Tuition will be refunded for any classes cancelled.
- This policy applies solely to classes. There are different refund policies for other MTC activities such as productions, ensembles, work shops, camps, etc.
- **No refunds made for classes missed due to inclement weather.**

**I understand and agree:**

- \* Musical Theater Center (MTC) is not responsible for articles left or stolen on the premises on the school.
- \* Photographs and videos taken during class, rehearsals and performances may be used by MTC for publicity purposes.
- \* For myself and my minor child(ren) identified in this registration form, I do hereby waive, release and forever discharge MTC, its directors, officers, members, employees and staff from any and all claims for damages and injury which I or my child(ren) may have or which hereinafter may accrue to me or my child(ren) against MTC as a result of alleged or actual negligence on the part of MTC, its directors, officers, members, employees and staff occurring during or in connection with any participation by me or my child(ren) in MTC activities, including classes, rehearsals, performances and related programs and events whether on MTC's property or any other site utilized by MTC.

Name \_\_\_\_\_

Date \_\_\_\_\_