

# Coupé Theatre Studio Registration Form Part 1

Registration Date: \_\_\_\_\_

PLEASE PRINT:

Parent/Guardian Email: \_\_\_\_\_

Parent First Name: \_\_\_\_\_ \*Last Name: \_\_\_\_\_

Parent/Guardian Cell # (\_\_\_\_\_) \_\_\_\_\_ Mobile Provider \_\_\_\_\_

Parent/Guardian Address: Street Apt # \_\_\_\_\_

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

Additional Parent/Guardian Information Email: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ cell #(\_\_\_\_\_) \_\_\_\_\_

Mobile Provider \_\_\_\_\_ Address: Street Apt # \_\_\_\_\_

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

## Student #1:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ M/F: \_\_\_\_\_

Date of Birth: (mm/dd/yyyy) \_\_\_\_\_ Grade \_\_\_\_\_

For text notifications Student Cell#: (\_\_\_\_\_) \_\_\_\_\_ Student's Mobile Provider: \_\_\_\_\_

## Student #2:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ M/F: \_\_\_\_\_

Date of Birth: (mm/dd/yyyy) \_\_\_\_\_ Grade \_\_\_\_\_

For text notifications Student Cell#: (\_\_\_\_\_) \_\_\_\_\_ Student's Mobile Provider: \_\_\_\_\_

## Student #3:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ M/F: \_\_\_\_\_

Date of Birth: (mm/dd/yyyy) \_\_\_\_\_ Grade \_\_\_\_\_

For Text notifications Student Cell#: (\_\_\_\_\_) \_\_\_\_\_ Student's Mobile Provider: \_\_\_\_\_

How did you hear about us: Friend  News Paper Ad  Online Ad  Website  Other

## Registration Amount

**FOR OFFICE USE:** Number of students in family \_\_\_\_\_ Student 1 # of hours \_\_\_\_\_ \$ \_\_\_\_\_

Student 2 # of hours \_\_\_\_\_ \$ \_\_\_\_\_

Student 3 # of hours \_\_\_\_\_ \$ \_\_\_\_\_

**Total due at registration** \$ \_\_\_\_\_

Payment method                      Check# \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_

Paid in full discount at time of registration prior to August 1<sup>st</sup>                      \$ \_\_\_\_\_ total paid

Payment plan: 5 Installments (Sept-Dec) No fee                      \$ \_\_\_\_\_ per installment

Payment plan: 10 Installments (Sept-April) \$5 fee per installment                      \$ \_\_\_\_\_ per Installment (+ \$5)

Student start date if registering after first class of season \_\_\_\_\_

Policy & Waiver signed    Proof of age    Student Group    Portal Info sent    Teacher Book    Entered by \_\_\_\_\_

## Coupé Theatre Studio Registration Form Part 2

**Student #1 Name:** \_\_\_\_\_ (full year registration to these classes)

Class Name	1 <sup>st</sup> choice Day/Time	2 <sup>nd</sup> choice Day/Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Student #2 Name:** \_\_\_\_\_ (full year registration to these classes)

Class Name	1 <sup>st</sup> choice Day/Time	2 <sup>nd</sup> choice Day/Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Student #3 Name:** \_\_\_\_\_ (full year registration to these classes)

Class Name	1 <sup>st</sup> choice Day/Time	2 <sup>nd</sup> choice Day/Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please select one of the following payment plan options:

- Paid in full discount must be paid at registration prior to August 1<sup>st</sup> 2019 Non Refundable Initial \_\_\_\_\_
- 5 installment payment plan Installments are Non Refundable Initial \_\_\_\_\_
- 10 installment payment plan Installments are Non Refundable \$5 fee per Installment Initial \_\_\_\_\_

**IMPORTANT: The amount paid at Registration Is Non-Refundable or Non-Creditable. Paid in full tuition is NON-Refundable. Installment payments are also non-refundable. Please Initial \_\_\_\_\_**