



704-576-5034

Tuition

30 minute Class \$180/semester or \$40/month (Dance with Me, Tap I/II)

45 minute class \$200/semester or \$50/month (Acrobatics I, Pre-Ballet I, Creative Movement)

60 minute class \$220/semester or \$55/month (Modern, Pre-Ballet II, Boys' Class, Acrobatics II, Street)

Ballet I- meets 2 x per week \$350/semester or \$85/month

Ballet II/III- meets 3 x per week with an additional pre-pointe/pointe class \$525/semester or \$125/month

Unlimited Classes (with teacher's consent) \$625/semester or \$150/month

Youth Ensemble (Audition Required) \$150 per semester

Open Door's tuition policy is based on a two semester academic year. Each semester is 18 weeks, however, registration assumes the student will continue for the full 36 week program. Monthly tuition is due on the first of every month. Late fees will be applied after the 5th.

In order to begin classes on the first day, each student must submit a completed registration form and signed code of conduct form, pay the one time registration fee of \$25 and submit payment for the first semester or first month of classes.

10% discount for siblings who register within the same semester and for students taking multiple classes.

Classes are non-refundable. Credits are only given due to long term sickness or injury with a Doctor's note. Please send your completed form with a check to:

Open Door Studios
1318-D1 Central Ave.
Charlotte, NC 28205
704-576-5034

www.opendoorstudios.com

Payment: Semester Month (Please Circle)

Amount: \_\_\_\_\_



Youth Registration

Child's First Name: \_\_\_\_\_

Child's Last Name: \_\_\_\_\_

Classes Requested: 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Age and Birthday: \_\_\_\_\_

Please Read and Sign the Following:

I, the parent or legal guardian, hereby authorize the staff of Open Door Studios to act for me according to their best judgment in any emergency requiring emergency treatment and I understand that my child's participation may cause injury. I accept this risk and agree that I will not hold the studio or the staff responsible. In addition, I agree that photos and video recordings of my child may be used by the studio for marketing purposes.

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