

Christopher Mohani • Artistic Director

DTT DANCE THEATRE OF TENNESSEE

Performing Arts and Dance Discovery Program
\$30 Registration Fee

Total Amount _____
Amount Pd _____
Balance _____

For office use only

STUDENT NAME _____ AGE _____

DATE OF BIRTH: _____ SCHOOL ATTENDING AND GRADE: _____

PARENT(S) NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS: _____

HOME PHONE _____ CELL _____ WORK _____

EMERGENCY CONTACT INFORMATION

NAME _____ RELATIONSHIP _____

PHONE _____

HOW DID YOU HEAR ABOUT US: _____

Please check program(s) you will be attending

Sessions (9:00am - 4:00pm)

Session 1: June 11 - June 29

Session 2: July 2 - July 20

Session 1 (3 weeks)

Session 2 (3 weeks)

Session 1 (2 weeks)

Session 2 (2 weeks)

Session 1 (1 week)

Session 2 (1 week)

Tuition **Full Session (3 weeks): \$350** **2 week option: \$250**

1 week option: \$150

Half Day option (9am - 12pm only): \$100

Before and After care (1 hour): \$50

Deposit **1 Session: \$60**

Multiple sessions: \$150

Before and After care is only an option for those taking a concurrent morning and afternoon session and is only available an hour before or after, Monday through Friday. Students must come with their own lunches; DTT does not provide lunch. For all camps, a deposit is required **one month** prior to the start date. Deposit is non-refundable, unless DTT has to cancel a class. Balance is due by the first class.

Payment Information:

Deposit: _____ + Lunch time care (if applicable) _____ + Registration Fee (if applicable) _____ Remainder of Tuition Due: _____

ONE installment

TWO installments, deposit amount immediately and tuition on 1st day of camp (\$5 payment fee applies)

Method of Payment: MasterCard Visa Amex Discover Cash Check # _____

Credit Card # _____ Exp. Date: _____

I hereby authorize Dance Theatre of Tennessee to charge the above-named card for tuition and fees for the Summer Dance Camps as indicated above. I understand that the first installment will be **charged immediately upon receipt** and the second installment will be charged on or after the start date of my selected camp. I understand the second installment will include a \$5 installment fee.

Name on card: _____ Billing ZIP Code: _____

Signature _____ Date _____

• 2710 Old Lebanon Rd., 15 Nashville, TN 37214 • (615) 391-5500 •

www.dancetheatretn.org