



INSTRUCTIONS FOR COMPLETING LEVEL I REGISTRATION PACKAGE

1. Fill in Student Info completely. Your D.O.B. is needed for material purposes.
2. Select your class group.
3. For the Start Date – put the month you will be starting.
Example: Start Date: January End Date: March
4. A payment **MUST** accompany this registration form to secure your space in class. If you do not remit a payment you do not have a space in the class.
5. If you would like the recommended “E-Guide For the First Time Actor” .pdf for \$10.00 – select this option and add the \$10.00 to your registration payment. E-Guide will be emailed when registration is processed.
6. Check the payment form you will be using and select how you will be paying the remainder of your contract. If you want your MC/ Visa to be automatically charged – select that option. If you want to pay by check, cash or money order at the **FIRST** class of your remaining months – select that option.
7. If using a MC/ Visa – fill in the credit / debit card information. You must include the exact billing address where the statement for the credit/ debit card is received. They must match or the card will be unable to be processed. There is a \$3.00 processing fee per transaction.
8. Sign your registration form.
9. For the Payment & Program policies – initial by each point indicating you understand each policy.
10. Sign the Payment & Program Policies form.
11. You may fax the registration in if you are using a MC or Visa. If you are using another form of payment please mail or drop off your registration.
12. Once registration and payment are received you will receive an email confirmation within 24 hours of processing. It is important you keep all confirmations of payment received for your records.
13. The class schedule is located on the website at www.thecompanyactingstudio.com in the **Enrolled Students Section**.

The Company Acting Studio www.thecompanyactingstudio.com

500 D-1 Amsterdam Avenue Atlanta, GA. 30306 | 404-607-1626 ph | 404-607-1191 fax

PROGRAM AGREEMENT: "Level I – Adults Acting Conservatory"

Sign and return with payment to address or fax number above. Email confirmation sent when registration received.

Student Name _____ Date of Birth _____ Sex: M F
Street Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

1. CLASS: (If your Group is full when your registration arrives, we will contact you to see if you would like to choose another group or WAIT LIST for your selected group. No fee to WAIT LIST.)

EVENINGS:

Group A Monday : 7:30-9:30 PM _____

Group B Wednesday: 7:30-9:30 PM _____

DAYTIME:

Group C Tuesday: 12:00-2:00 PM _____

2. FINANCIAL AGREEMENT

The agreement is for three consecutive months. All students start at first class of month.

Start Month _____ End Month _____

FEE: \$90.00 (ninety) per month.

++ If paying with MC/ Visa there is a \$3.00 processing fee per transaction. ++

PAYMENT FOR MINIMUM OF ONE MONTH IS REQUIRED TO REGISTER.

Initial One Payment Option:

_____ I am paying in full for this three month agreement. By Cash___ CC___ Check___ MO_____

_____ I will pay my remaining months tuition monthly. Please Charge my monthly tuition plus \$3.00 processing fee automatically to the card listed below on the 1st of each remaining month.

_____ I will pay my remaining months tuition on or before the first class of the month with cash, check or money order.

_____ **YES!! Email me my "E-Guide for the First Time Actor" for \$10.00 extra (.pdf emailed upon registration / payment)**

3. Credit/ Debit Card Information: (MC/ Visa Only)

Card # _____ Exp Date _____

Name as it appears on the card _____

Street Address where cc statement is received: _____

City _____ State _____ Zip _____

AFTER YOUR THREE MONTH AGREEMENT IS UP:

- Following your three month agreement having had good attendance and participation, you will be offered a spot in the INTERMEDIATE COURSE.
 - The fee for this course is also \$90.00 (ninety) per month.
 - No contract required, you renew and pay month to month as you work towards auditioning for Level II.
 - This course meets on Mondays (A) or Wednesdays (B) 7:30 – 9:30 PM.
 - While there are occasions that someone is asked to audition for Level II immediately after Level I and skips the INTERMEDIATE COURSE, this is up to the Instructor and Executive Director.

4. MUST READ AND SIGN:

My signature below is authorization to charge the card number listed above for the selected amount when paying by credit/ debit card. My signature below agrees me to the following: I understand that the total cost for the program is as listed above and payment of one month in full is required for registration. I understand this agreement is for three consecutive months of class. I understand that there are no refunds for missed classes. I understand that there are no refunds. No fees can be transferred to another program, to private training or to another student. I understand that if I chose to pay in full absolutely NO REFUNDS will be made. If I chose a monthly agreement and need to end my agreement prior to the end date of the agreement, I am subject to a penalty payment of half of the total balance remaining on the agreement. By my signature below I indicate that I understand and agree with this financial agreement. I have signed a payment and program policies agreement as well.

Sign: _____

Date: _____

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Payment and Program Policies

STUDENT NAME _____ PARENT/GUARDIAN _____

Please read each point carefully and initial by each one. Please sign at the bottom to indicate that you understand the following statements. Please be sure to ask any questions before signing.

_____ 1) Student agreements are a legal binding contract. Entering into an agreement with **The Company Acting Studio** makes the student liable for the full amount of the contract regardless of absences.

_____ 2) **Tuition is due in full for each month on or before the first class of the month. You are liable for the full term of three months. If you need to terminate your agreement before its completion please see #9.**

_____ 3) There is a \$25.00 fee for returned checks. New payment must be remitted in cash or by credit card.

_____ 4) **After your three month agreement having had good attendance and participation, you will be offered a spot in the INTERMEDIATE COURSE.**

_____ 5) Students are expected to follow the rules and behavior protocols established within the school. Any student who causes a disruption to their class, the school or the learning environment of other students will be warned. After one warning, that student can be asked to leave the program and no fees will be returned.

_____ 6) **Students cannot bring friends or family to class.**

_____ 7) Students cannot leave children who are friends or family members under the age of 18 at the school unattended.

_____ 8) **The Company Acting Studio does not guarantee career-advancement or the right to enroll in further levels due to participation in Level I.**

_____ 9) If I chose a monthly agreement and need to terminate my agreement prior to the end date of the agreement, I am subject to a penalty payment of half of the total balance remaining on the agreement.

By my signature below, I accept and agree to the statements above.

Signature

Student | Parent/Guardian

Date