

Student: _____ Date: _____
Name of Pre. / Elem. School _____
Currently Attending: _____
DOB: _____ Age as of 9/1/2026 _____
New RPSD Student Y / N _____ If yes, please write referral here: _____
Address: _____ Apt No: _____
City: _____ State: _____ Zip: _____
Parent/Guardian: _____
Parent/Guardian 1 _____ Parent/Guardian 2 _____ Authorized Pick-Up _____
Parent/Guardian Email: _____ This will be the primary email address RPSD uses to share information
Parent/Guardian Phone: _____ Alternate Phone: _____
Emergency Contact: _____ Relationship: _____
Emergency Phone: _____ Emergency Email: _____
Injuries/Allergies: _____
Additional Notes: _____

Class Tuition - Please mark all classes on the reverse - Registration cannot be completed without class selection

Classes per Week	Monthly	Per Term	Per Year	x	Please circle class(es)
Pre-Dance I/II (3-4)	\$ 100.00	\$ 400.00	\$ 800.00	☐	TUE 4:00-4:45pm SAT 9:00-9:45am
Pre-Dance III (5+)	\$ 100.00	\$ 400.00	\$ 800.00	☐	THU 4:45-5:45pm SAT 9:45-10:45am
Pre-Dance IV (6+)	\$ 97.50	-	\$ 975.00	☐	THU 4:45-5:45pm SAT 9:45-10:45am
Basic Hip Hop (6+)*	\$ 97.50	-	\$ 975.00	☐	THU 4:00-4:45pm
Basic Jazz (6+)*	\$ 97.50	-	\$ 975.00	☐	MON 4:30-5:30pm SAT 12:00-1:00pm

*Basic level classes operate under YDTP and offered for the full year ONLY

RPSD Fees

Term Options - Please Initial

Registration Fee	\$ 100.00	Registration fee will be processed separately from tuition and is non-refundable. (Early Bird Discount: \$75.00 Reg Fee through July 31, 2026)	Term I (Sep. 8, 2026 - Dec. 20, 2026)	☐
Drop Fee	\$ 50.00	We require written notice for cancellation of monthly payment schedules. Tuition for classes missed prior to notification will not be refunded.	Term II (Jan. 11, 2027 - Apr. 18, 2027)	☐
			Term III (Apr. 19, 2026 - May 23, 2027)*	☐

*Term III only offered to Pre-Dance IV students

Payment Options - Please Initial - Registration cannot be completed without term and payment choices.

One-Time Payment

I agree to have the tuition and registration fee paid in full upon receipt of the registration form using the payment information provided below.

☐

Term Payments

I agree to have the tuition and registration fee paid upon receipt of the registration form and the start of each new term using the payment information provided below.

☐

SUBTOTAL: \$

REGISTRATION FEE \$ 100.00

TOTAL DUE: \$

Monthly Auto-Pay

I agree to have tuition payments paid in 8 (eight) OR 10 (ten) consecutive months on the 1st or 15th of every month upon receipt of the registration form through May 2027.

☐

Payment Arrangement

I would like to request a special payment arrangement (including monthly cash/ check payments). I understand that I must contact the Enrollment Coordinator to complete my registration.

☐

MONTHLY PAYMENT: \$

Credit Card # _____

EXPIRATION _____ CW _____ Draft Date 1st or 15th

Policy

TUITION POLICY By signing this form, I/we understand that tuition is non-refundable once a student is enrolled. Students who miss class or withdraw before the end of the year are required to pay drop fee and will not be reimbursed for classes that were missed prior to written notification date.

CANCELLATION POLICY Classes are subject to cancellation at the discretion of the RPSD and/or due to low enrollment.

AUTO-PAY AGREEMENT By enrolling in the Auto-Pay Program (the "Program"), you are authorizing Ruth Page Center ("RPC"), to debit the credit card you designate to pay automatically the amount due on class registration form. Auto-Pay debit will occur on the Payment Date selected on your registration form. To stop automated payment or to terminate participation in the Program, you must EMAIL registration@ruthpage.org. Auto-Pay payments will continue until you cancel your enrollment. RPC may withdraw your student at any time if your auto-pay is returned unpaid by your financial institution. If any auto-pay is returned unpaid by your financial institution for any reason, RPC may charge

PHOTO RELEASE By signing this form, I/we grant the Ruth Page Foundation the unrestricted right to use and publish photographs or video footage of my student(s) for PR, promotional use, editorial, advertising and marketing.

LIABILITY WAIVER By signing this form, I/we agree to participate in the Ruth Page Pre-Dance Program (referred to herein as the "Activity") and to release, waive, discharge, and covenant not to sue, nor hold Ruth Page Foundation, its trustees, officers, volunteers and employees (hereafter referred to as the "Releasees") from and against any and all liabilities, demands, claims, or injuries, including death, that I may sustain during or in conjunction with the Activity. I/we assume all risks related to the use of any and all spaces used by Releasees. I/we will not hold Releasees liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes.

X _____
Signature: Parent/Guardian or Student if over 18

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