



Chicago Street Theatre School REGISTRATION FORM

2019-2020

Student Name (Please Print) _____

Grade _____ Gender _____ DOB _____

Address _____ City _____ Zip _____

Phone _____ Parent E-Mail* _____

*Our most frequent form of contact is email. Please print accurately and check it for updates.

Mom's Name _____ Work or Mobile Number _____

Dad's Name _____ Work or Mobile Number _____

Emergency Contact (if parents unavailable) _____

Phone _____ Relationship _____

May we use images of your child in future CTG brochures, ads, web page or literature? Yes No

How did you hear about our program? _____

(Please attach Emergency Medical Treatment Authorization with Refund Policy)

Tuition covers student Membership Fee and includes a Children's Theatre Works T-shirt to wear to class!

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SPRING CLASSES

*Schedule will remain the same as the fall semester.
All classes run 12 weeks (unless otherwise indicated).
They begin the week of February 17 and end
the week of May 11, 2020.*

- 6 Weeks Pre-SEEDS (K) Mondays, 4-4:45 pm
April 6-May 11, 2020
- SEEDS (Grades 1-2) Tuesdays, 4:30-5:30 pm
- SEEDS (Grades 1-2) Thursdays, 4:30-5:30 pm
- SPROUTS (Grades 3-4) Tues., 5:30-6:30 pm
- SPROUTS (Grades 3-4) Thurs., 5:30-6:30 pm
- BUDS (Grades 5-6) Tues., 6:30-7:30 pm
- BUDS (Grades 5-6) Thurs., 6:30-7:30 pm
- BUDS ADVANCED (Grades 5-6)
Mondays, 5:00-6:00 pm
- BLOOMS (Grades 7-9) Mon., 6:30-7:30 pm

WORKSHOP-Exploring Improv

- 5 Weeks (Grades 6-12) Mon, 7:30-8:30 pm
February 17-March 16, 2020

Tuition Information

- SPRING Full Tuition **NEW STUDENT OR** \$175.50
 - SEMESTER PAYMENT PLAN Deposit \$100.50
- SPRING Full Tuition **CONTINUING from Fall OR** \$170.00
 - SEMESTER PAYMENT PLAN Deposit \$100.50
- Workshop **OR** Pre-Seeds \$ 95.50

All deposits count as the first payment and hold registrations.

Subtract Discount(s) IF APPLICABLE:

- Second Child Registration (\$10) - \$10.00

- "Parents In the Wings" (5-20%)

(To be determined from previous semester by Lisa) _____ %

TOTAL AMOUNT DUE \$ _____

**If selecting the Payment Plan, by signing below, I agree to make remaining payment.*

T-Shirt Size - Please Circle One Choice

Youth: S M L Adult: S M L XL

If student was enrolled in the FALL semester, the T-Shirt remains the same and discounted amount reflects this cost. They will not receive a NEW shirt.

Workshop students do not receive T-Shirts.

Payment Information

- Master Card Visa Check # _____ Cash

Card Number _____

Expiration Date _____ Security Code _____

*Signature _____

FOR OFFICE USE ONLY:

Date Received: _____ Initials: _____ Batch#: _____