## Treasure Valley Ballet Heademy

## **Summer Classes (2025)**

www.tvballet.com

Welcome to summer classes at TVBA! These weekly classes facilitate continued growth while allowing for summer fun. Each class will meet ten times from June 2<sup>nd</sup> through August 7<sup>th</sup>. To register, a single payment for the tuition amount indicated below is due along with this form. For questions, please email <u>info@tvballet.com</u> or call 208-855-0167.

## **Summer Schedule and Tuition**

June 2<sup>nd</sup> − August 7

Pre-Ballet 1/2 (ages 3-5) \$120 ~ Wednesday 11:10 - 11:55 AM

Pre-Ballet 2-4 (ages 4-7) \$120 ~ Tuesday 5:35 - 6:20 PM

Pre-Ballet 3/4 (ages 5-7) \$120 ~ Monday 11:10 - 11:55 AM

Primary 1/2 (ages 7-9+) \$140 ~ Tuesday 11:00 AM - 12:00 PM

Primary 1/2 (ages 7-9+) \$140 ~ Thursday 5:20 - 6:20 PM

Ballet 1-3 (ages 9+) \$160\* ~ Tuesday 9:35 - 10:50 AM

Ballet 4/5 (ages 12+) \$180\* ~ Monday 10:00 - 11:30 AM

Ballet 4/5 (ages 12+) \$180\* ~ Tuesday 6:30 - 8:00 PM

Ballet 4/5 (ages 12+) \$180\* ~ Thursday 6:30 - 8:00 PM

Ballet 6-8 (ages 14+) \$180\* ~ Monday 9:30 - 11:00 AM

Ballet 6-8 (ages 14+) \$180\* ~ Wednesday 9:30 - 11:00 AM

Ballet 6-8 (ages 14+) \$180\* ~ Thursday 6:00 - 7:30 PM

\*Multiple classes enrollment: \$255 for both Ballet 1-3; \$285 for two Ballet 4/5 or 6-8; \$375 for three Ballet 4/5 or 6-8

- Please note that placement cannot be held until this form and tuition are received
- All 2025 summer students can take \$5 off the registration fee for the upcoming '25-26 season
- A discount of 10% off tuition can be applied to each concurrent student from the same immediate family

Student Name		Birth Date	Age	
Address		City	Zip	
Guardian	Email		Phone	
Emgcy Contact	Relation		Phone	
Requested Classes Please return with ACH Payments Form to <a href="mailto:info@tvballet.com">info@tvballet.com</a> or with check to <a href="mailto:1545">1545</a> E Leigh Field Dr., Ste. 150, Meridian, ID 83646				

**Medical Consent and Liability Release:** In the event of injury or sudden illness, I authorize the agents and instructors of *Treasure Valley Ballet Academy LLC* to arrange for such timely medical services they deem reasonable and necessary to the welfare of the injured or ill. I hereby release *Treasure Valley Ballet Academy LLC* and its associates from all liability in taking such actions. I hereby release from liability *Treasure Valley Ballet Academy LLC*, and any other associated entities, agents, instructors, employees, and managers thereof. This includes but is not limited to liability from personal loss, damages by reason of injury or illness, and property damages or loss that may be sustained. I hereby warrant that I am of full age to sign this consent and release or that I am a legal guardian of the above-named minor.

Signature of Parent/Guardian	Date
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