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Student Registration Package

- Includes:
1. Student Agreement
 2. Student Information Sheet (2 pages)
 3. Tuition Protocol
 4. Credit Card Authorization Agreement



Student Agreement

By submitting the Student Information Sheet, you agree to accept the rules outlined in this Student Agreement. Actors are expected to show up with assignments fully prepared and maintain the highest level of commitment and respect for their own work, the work of their fellow actors, and the Instructors.

1. Upon review of this agreement, and prior to the next class, students must submit a fully completed Student Registration Package, including the Student Information Sheet and a Credit Card Authorization Agreement or submission of Post-dated Cheques as per the Tuition Protocol. Students will not be accepted in class without the submission of appropriate tuition. Monthly tuition is \$195.00.
2. Please notify the studio office if a student has a medical need (i.e. **dietary issues, emotional concerns, diagnosed physical illness, mental illness or related concern.**) We are committed to each and every student; understanding their individual needs and character is paramount to the success of this experience. Please take a moment to share with us this critical information.
3. **No lateness** without sufficient notice (no later than 3:15 PM on the day of class). Classes start at 4:30 or 7:15 PM sharp, and the doors close when class begins.
4. Students are responsible for obtaining a copy of lost scripts from their scene partner or from the office by e-mail. Students are encouraged to keep their class material in a Student Workbook.
5. **There is no discount for missed classes.** In the event that a student misses class due to a scheduling conflict or illness, students are welcome to attend a different class.
6. **In the case of a physical illness**, it is mandatory that the student remain home, get better and make-up the missed class when available.
7. Students must provide the office and their scene partner with a minimum of 24 hours notice, by e-mail, if they will be absent from class. Note: students must advise the office, not their Instructor.
8. To withdraw from the program, students must notify the office by e-mail & provide a minimum of 7 days notice. There are no refunds for withdrawing from the program before the end of the month.
9. **Absolutely NO cell phones or electronic devices are permitted in class.**
10. Office hours are 11:00 AM – 6:00 PM Monday to Friday. The studio office is closed on weekends.
11. Any special props (e.g. plastic swords, “cigarettes”) that are required for scene work must be approved by an Instructor prior to class. Actors must provide their own props, set decorations, & costumes. School furniture, decorations in the lobby & items on staff desks are not available for class use.
12. No gum, food, or drink is permitted in class, unless it is included in the scene work and approved by an Instructor. Drinking water is provided and students are welcome to bring their own water bottle.
13. Students and Parents should refer to, and be familiar with, the First Step Online Calendar which provides a complete yearly schedule that identifies all school breaks. As a general rule, classes ALWAYS operate (holidays included) unless otherwise announced by e-mail from the office.
14. Although the First Step does not participate in social media, class photos and videos may be featured on the First Step website. Photos and videos may also be occasionally used in e-mails home to parents & students.
15. Now that you've finished reading this whole student agreement... everything else is FUN!



Student Information Sheet (Required Info)

(Please Print Clearly in BLOCK LETTERS) Program: Youth Adult

Name: _____ Sex/Gender Identity: _____

Date of Birth (YYYY-MM-DD): _____ Age: _____

Student's E-mail Address: _____

Student's Cell (if applicable): _____

Home Phone (if applicable): _____

Home Address: _____

City: _____ Postal Code: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Emergency Contact Relationship to Student: _____

Student Information Sheet (Additional Info)

(Please Print Clearly in BLOCK LETTERS)

Parent / Additional Guardian 1

Name: _____

Cell: _____

Work/Other: _____

E-mail: _____

Parent / Additional Guardian 2

Name: _____

Cell: _____

Work/Other: _____

E-mail: _____

How did you first find out about The First Step / who referred you:



Tuition Protocol: For Students in On-going Programs

Monthly tuition is \$195.00. There are two ways to submit tuition for The First Step Actors' Workshop on-going programs:

1. Credit Card

Students may register their credit card in our on-going student tuition payment system using the **Credit Card Authorization Agreement** (in this registration package). Card information is kept in a secure location at all times.

Note: **Interac** may not be used for on-going class payments. It may only be used for one-time payments such as coaching and taping.

2. Post-dated Cheques

Updated student tuition files may also be maintained with **6 post-dated cheques submitted twice per year**. Cheques are to be dated for the 1st of each month, should be made out to **The First Step Actors' Workshop** and submitted to the office prior to the next class.

Unused post-dated cheques will be promptly returned to any student wishing to leave the program at any time.

Note: There is a \$25.00 Bank Service Fee that will be charged for all cheques returned as NSF (Non Sufficient Funds)

All students in an on-going program are required to keep their tuition file up to date and will be notified when their payments run out. Students will not be accepted in class without the submission of appropriate tuition.



Credit Card Authorization Agreement

As a student or as a parent with a child attending ongoing classes at The First Step Actors' Workshop, I understand that tuition payments are processed at the time of registration and on the first of each month thereafter. By signing this form, I agree to the terms of payment outlined in the Tuition Protocol sheet.

Student's Name: _____

I, _____ agree to have my
(Name of cardholder)
credit card automatically charged on the first day of each month of enrolment.
Monthly Tuition is \$195.00.

Credit Card Information

Visa or MasterCard

Card Number: _____ Expiry: _____

This information sheet will be kept in a secure location to protect client information. If a student cannot continue with classes, this information sheet will be promptly destroyed.

Signature of Cardholder: _____

Cardholder Email: _____ Phone: _____