

MARINA ALMAYEVA SCHOOL OF CLASSICAL BALLET

2011 Summer Ballet Intensive, June 6–July 1

ADVANCED BALLET WORKSHOP - four-weeks long, 5-days per week program designed for the advanced and pre-professional level dancers.

INTERMEDIATE BALLET CAMP - four-weeks long, 5-days per week, 2 hours per day program designed for dancers of intermediate level.

Students can register for 1, 2, 3 or 4 weeks of the Advanced Ballet Workshop and for a minimum of 2 weeks of the Intermediate Ballet Camp.

Student Registration Form

STUDENT

LAST NAME	FIRST NAME	PHONE
ADDRESS	CITY	ZIP
EMAIL		
DATE OF BIRTH / /	SEX	GRADE
STUDIO NAME		
PREVIOUS BALLET TRAINING (# OF YEARS)	EMAIL	

PARENTS / GUARDIANS

FATHER'S NAME	PHONE
MOTHER'S NAME	PHONE
EMERGENCY CONTACT NAME	PHONE
MEDICAL CONDITIONS / SPECIAL NEEDS:	

Intermediate Ballet Camp, 10 hours per week

2 weeks - \$350	<input type="checkbox"/>
3 weeks - \$450	<input type="checkbox"/>
4 weeks - \$525	<input type="checkbox"/>

Advanced Ballet Workshop, 24 hours per week

1 week - \$400	<input type="checkbox"/>
2 weeks - \$700	<input type="checkbox"/>
3 weeks - \$900	<input type="checkbox"/>
4 weeks - \$1,050	<input type="checkbox"/>

I am registering my child for ___ week(s) of 2011 Summer Intensive starting from June ____
I've enclosed a check for \$75 - a non-refundable registration fee that will be applied to tuition.
The tuition balance of \$____ will be due on the first day of the first workshop week my child is attending.

BY MY INITIALS BELOW, I AGREE TO THE FOLLOWING POLICY:

I am aware that there is a certain degree of risk involved in all physical activity, and that potentially severe injuries can occur. I understand that it is the express intent of Marina Almayeva School of Classical Ballet to provide a safe environment and correct training in order to avoid any and all injuries to my child(ren).
Therefore I release Marina Almayeva School of Classical Ballet from any liability should my child become injured while under the supervision of Marina Almayeva School of Classical Ballet.

____ PARENT / GUARDIAN SIGNATURE _____ DATE ____/____/____
(initials)