

2008 Summer Camp / Workshop Registration Form

(Please use separate forms for each student. Copied forms are acceptable.)

Student's Name _____ Birth Date _____ Male / Female
Mother's Name _____ Father's Name _____
Address _____ City & Zip _____
Telephone (H) _____ (W) _____ (Cell/Pager) _____
Email address _____
Student's Doctor _____ Doctor's Phone _____
Emergency Contact _____ Contact's Phone _____
Allergies/Health Problems _____ Medications _____
HOW DID YOU HEAR ABOUT THE BALLET SCHOOL? _____

* * * Please check ALL camps that apply. Use a separate form for each student. * * *

"Imagination Station": ages 3-6, 9am-12noon, \$150/wk, add \$25/wk for Lunch Bunch (12 noon-12:45pm)

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|---|---|--------------------------------|
| <input type="checkbox"/> June 16-20 (Lunch Bunch? Y / N) | <input type="checkbox"/> July 14-18 (Lunch Bunch? Y / N) | (DEPOSIT = \$75 per week) |
| <input type="checkbox"/> June 23-27 (Lunch Bunch? Y / N) | <input type="checkbox"/> July 21-25 (Lunch Bunch? Y / N) | *no class July 4 th |
| <input type="checkbox"/> June 30-July 3* (Lunch Bunch? Y / N) | <input type="checkbox"/> July 28-Aug 1 (Lunch Bunch? Y / N) | \$120 for the week |
| <input type="checkbox"/> July 7-11 (Lunch Bunch? Y / N) | <input type="checkbox"/> Aug 4-8 (Lunch Bunch? Y / N) | |

Musical Theater Workshops ("It's Showtime"): ages 7-11, 9:00am-1:00pm

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| <input type="checkbox"/> June 16-27, \$400 (DEPOSIT = \$200) | <input type="checkbox"/> July 7-18, \$400 (DEPOSIT = \$200) |
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Ballet Intensives:

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| <input type="checkbox"/> Summer Preparation: June 16-20, 10:00am-12:00 noon, \$100 | (DEPOSIT = \$50) |
| <input type="checkbox"/> Pre-Pointe Workshop: June 23-July 3, 9:00am-1:00pm, \$432 | |
| Week 1 \$240 (Deposit = \$120) | Week 2* \$192 (DEPOSIT = \$96) *no class July 4 th |
| <input type="checkbox"/> Intermediate Ballet Workshop: August 4-15, 9:00am-1:00pm, \$480 | (DEPOSIT = \$240) |
| <input type="checkbox"/> Fall Warm-up: August 18-22, 10:00am-12:00 noon, \$100 | (DEPOSIT = \$50) |

Jazz Intensive:

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| <input type="checkbox"/> Intermediate/Advanced: July 28-August 1, 9:30am-12:30pm, \$180 | (DEPOSIT = \$90) |
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Rhythm Tap Intensives:

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| <input type="checkbox"/> Intermediate (Rising Tap 4-7), July 21-25, 9:00am-1:00pm, \$240 | (DEPOSIT = \$120) |
| <input type="checkbox"/> Advanced (Rising Tap 8-Adv), August 4-8, 9:00am-1:00pm, \$240 | (DEPOSIT = \$120) |

• I understand that cancellations must be received in writing at least 14 days before the camp/workshop start date. No refunds or credits will be given after this time.

• I affirm that my child is in good health and has no medical condition that would prevent him/her from taking part in camp/workshop activities. If no family member can be reached in the event of a medical emergency, I authorize The Ballet School to allow emergency medical treatment.

Signature of Parent or Guardian _____ Date _____

FOR OFFICE USE ONLY: Total Cost: _____ Balance Due: _____
Amount Received: _____ Date: _____ Method of Payment (Check #) _____