

# School of the Minnesota Ballet Registration Form

## Summer Intensive July 12 – 30, 2010

Student's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Parent(s)/Guardian(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Eve. Phone \_\_\_\_\_

Student's E-mail Address \_\_\_\_\_

Dance School Affiliation \_\_\_\_\_ City/State \_\_\_\_\_

**Tuition: \$800 \$100 deposit to be paid by Friday, June 25, 2010**

**Classes: Students are required to attend all classes.**

Ballet Technique • Pointe • Character • Jazz • Modern • Tap • Pilates Mat Exercises  
Performance Rehearsal • Contemporary Repertoire  
Pas de Deux (Level II only) • Corps de Ballet (Level I only)

**Hours Level I:** 11 A.M. – 1:15 P.M. Ballet Technique & Pointe  
2 P.M. – 4:45 P.M. Rotating schedule of other technique

**Hours Level II:** 10 A.M. – 12:45 P.M. Ballet Technique & Pointe  
2 P.M. – 4:45 P.M. Rotating schedule of other technique

**Housing:** \$190 per week with host family

Housing may also be arranged with (call for rates; no Ballet chaperones provided):  
University of Minnesota Duluth, 218-726-7381  
College of St. Scholastica, 218-723-6391

Method of payment:  Check  Visa  MasterCard

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature for credit card \_\_\_\_\_ 3-digit code (on card back) \_\_\_\_\_

### Student Liability Release Agreement

I agree that I will not hold the Minnesota Ballet, its directors, officers, administrators, or faculty members liable for injuries I may sustain or illnesses contracted by me while I am a participant in the Summer Intensive 2010. I also agree that I will not hold the Minnesota Ballet responsible for the loss or damage of personal property while I attend this program.

I understand that the details of housing arrangements, transportation, and supervision outside the School of the Minnesota Ballet classes are not the responsibility of the Minnesota Ballet.

Student's signature \_\_\_\_\_

For student under the age of 18:

Parent's or guardian's signature \_\_\_\_\_

I have enclosed:

- Completed registration
- Signed liability release
- Deposit of \$100 to be paid by June 25, 2010

*Please respond as soon as possible, as we have a limited number of spaces available. I hope you will join us for our exciting Summer Intensive in the beautiful lakeside city of Duluth!* —Robert Gardner, Artistic Director

Mail or fax to: School of the Minnesota Ballet 301 W. First St., Suite 800 Duluth, MN 55802  
218-529-3742 FAX 218-529-3744

www.minnesotaballet.org balletmaster@minnesotaballet.org