



APPLICANT INFORMATION

NAME (First, Last):			
Cell Phone:		Address:	
Home Phone:			
E-mail:			
AGE:		DOB (DD/MM/YEAR):	
		GENDER:	
Current Dance School:			
Recommended by:		Phone:	
Previous Dance Experience: <i>(Attach page if needed)</i>			
Medical History, Conditions, Injuries, + Allergies:			

PARENT/GUARDIAN INFORMATION (If applicant is under 18 and contact information is different than above)

NAME (First, Last):			
Cell Phone:		E-mail:	
Home Phone:		Address:	
Work Phone:		City, ST ZIP	

STATEMENT OF AGREEMENT

I agree the above information is both current and accurate to the best of my knowledge.

PHOTOGRAPHY RELEASE

I give MSB and its dance company (North Shore Civic Ballet) permission to use my photograph/video for publicity purposes.

WAIVER OF LIABILITY

I am aware that all forms of dance and the exercise associated with it place unusual stress on the body and carry with them the risk of physical injury. I assume this risk and agree that MSB, its staff, and its facilities shall not be liable in any way for the injuries sustained during the attendance of the program or any of its functions. I have read, understand and agree to this waiver of liability.

APPLICANT SIGNATURE (if 18 years of age or older)

DATE

PARENT/GUARDIAN SIGNATURE (if applicant is under 18)

DATE

APPLYING FOR: (CHECK ALL THAT APPLY)

SUMMER INTENSIVE 2020

AGES 11+ | JULY 13 - AUG 1

- \$550 WEEK 1 July 13-18 **OR** WEEK 2 July 20-25
 \$930 WEEK 1-2 July 13-25 **OR** WEEK 2-3 July 20-31
 \$1,080 WEEK 2-3 + PERFORMANCE July 20-31 | August 1
 \$1,460 WEEK 1-3 + PERFORMANCE July 13-31 | August 1

10% DISCOUNT POSSIBLE FOR THE ITEMS ABOVE.
If paid in full by APRIL 10, 2020

young

\$350 **SUMMER INTENSIVE** 2020
AGES 8-12 | AUGUST 5-9

\$20 EVALUATION
Only for those New to MSB

\$78 EXCURSION
Jacob's Pillow | Sunday, July 26

HOUSING

- \$300 1 Week
 \$600 2 Weeks
 \$900 3 Weeks

PAYMENT (NO REFUNDS OR EXCHANGES)

- \$200 DEPOSIT
Required to reserve your space.
- I AM PAYING IN CASH
In-Person Option ONLY. Do not mail cash.
- CHECK ENCLOSED
Payable to *Marblehead School of Ballet*
- CHARGE MY CREDIT CARD
 VISA MASTERCARD
- I WOULD LIKE TO PAY IN FULL FOR A 10% DISCOUNT.
Applicable to Summer Intensive Program (Ages 11+) Only.
Application + Payment must be received by APRIL 10, 2020.
\$200 Deposit not required if you choose this option.
- I WOULD LIKE TO PAY IN FULL.
\$200 Deposit not required if you choose this option.

CREDIT CARD INFORMATION

Card Number		Expires: (MM/YR)	
Name: (as it appear on card)			
Billing Address:			
City, ST ZIP			
Card holder Signature:		Date:	