

METROPOLITAN

BALLET ACADEMY AND COMPANY

- SUMMER DANCE 2019 -

Student Information

Name _____ Age _____ Birthdate _____

Address _____

Cell phone _____ Email _____

Emergency contact _____ Phone _____

Parent 1 Information

Name _____ Email: _____

Address (if different from student) _____

Cell phone _____ Home phone _____ Work phone _____

Parent 2 Information

Name _____ Email: _____

Address (if different from student) _____

Cell phone _____ Home phone _____ Work phone _____

Liability Release:

I am aware that dance training and the gymnastic exercises associated with it place unusual stress on the body and carry with them the risk of physical injury. On behalf of my child and myself (and if I am no longer a minor, on my own behalf), I assume the risk and agree that the Metropolitan Ballet Academy (MBA) and/or the Metropolitan Ballet Company (MBC) and/or the director, instructors and employees of MBA or MBC shall not be liable in any way for injuries sustained during attendance at the ballet school, company or any of their related functions. I likewise release from liability MBA, MBC, the director, instructors and/or employees for any damage or loss of property incurred during my participation in the activities of MBA and/or MBC. I also understand that good ballet training involves touching and adjustment of the student's body by the instructor.

Publicity Release:

I hereby authorize the Metropolitan Ballet Academy and/or the Metropolitan Ballet Company to record the student's picture and voice on photographs, films, and tapes, to edit these recordings at its discretion, and to incorporate these recordings into movie and sound films on tapes, radio or television programs and/or in print media. I also give my permission for MBA and/or MBC to use and license others to use these materials in any manner or media whatsoever. MBA and/or MBC are permitted to use these materials for publicity, advertising and sales promotion and to use the student's name, likeness and voice and biographic or other information in connections with them. I acknowledge that no promises of compensation were made by MBA or MBC for such use.

I have read, understand, and agree to the Liability Release and the Publicity Release.

Student's Name Printed _____

Parent's Signature _____ Date _____

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Please place an X next to the week(s) you would like to enroll.

Children's Camps for ages 3 to 6 - 9:30 a.m. - 12:30 p.m.

___ ages 3-4: June 24-28 | \$185

___ early drop-off for the week (8:30 a.m.) \$50

___ ages 5-6: July 8-12 | \$185

M3=Math x Music x Movement: for children entering 2nd, 3rd, or 4th grade in September | 12:30 - 3:00 p.m.

___ July 8-12 | \$185

Summer Dance Intensive Beginner & Intermediate I Levels - 9:30 a.m. - 12:00 p.m.

___ week 1: July 8-12 | \$185

___ week 2: July 15-19 | \$185

___ weeks 1 & 2: July 8-19 | \$300

___ add M3 to your dance studies: July 8-12 | \$100

Summer Dance Intensive Intermediate II Level - 9:30 a.m. - 4:00 p.m.

Weeks 2 through 5:

___ week 2 | July 15-19

___ week 3 | July 22-26

___ week 4 | July 29-Aug 2

___ week 5 | Aug 5-9

Weeks 2 through 5:

___ any one week | \$395

___ any two weeks | \$750

___ any three weeks | \$975

___ any four weeks | \$1150

Summer Dance Intensive Advanced Level - 9:30 a.m. - 4:00 p.m.

Weeks 2 through 5:

___ week 2 | July 15-19

___ week 3 | July 22-26

___ week 4 | July 29-Aug 2

___ week 5 | Aug 5-9

Weeks 2 through 5:

___ any one week | \$395

___ any two weeks | \$750

___ any three weeks | \$975

___ any four weeks | \$1150

Room & Board at Manor College - Female students ages 11-15

___ week 4: July 22-Aug 2 (\$550)

Gracious host families available for male students (all four weeks) and for female students (weeks 2, 3 and 5).

A \$30 Registration Fee is required of all students not currently enrolled at MBA.

Please enclose a 50% non-refundable registration deposit by May 15, 2019. Make check payable to: "Metropolitan Ballet Academy" and return to: Metropolitan Ballet Academy, 700 Cedar Road ~ Jenkintown, PA 19046

www.metropolitanballetacademy.com | collinsvidnovic@verizon.net | 215-663-1665