

**SOUTHLAND BALLET ACADEMY
2012 JUNIOR SUMMER INTENSIVE APPLICATION**

Student's Name _____
Date of Birth _____ Email _____
Phone _____ Cell _____
Parent/Guardian Name _____
Address _____
City _____ State _____ Zip Code _____
Gender _____ Grade in School _____
Years of Ballet Training _____ Years on Pointe Training _____
Current Ballet School _____
Current Ballet Instructors _____
Number of hours per week _____
Previous Summer Intensives for past 3 years _____

Summer Program (Please check)

Junior Intensive: August 6 - 17 - Irvine

DISCLAIMER – PLEASE READ & SIGN

SOUTHLAND BALLET ACADEMY (SBA) employs the most thoroughly trained instructors for each class and audition. Utmost care will be given to all students. However, SBA will not be responsible for injury to any student while auditioning for or enrolling in the program. I have read, understand, and agree to the above statement.

Parent/Guardian _____ Date _____

FOR OFFICE USE ONLY:			
Accept _____	Waitlist _____	Decline _____	Level Assigned _____
Audition Fee: _____	Deposit Paid _____	Balance Paid _____	