

Academy of Russian Ballet

Summer intensive 2012

Registration Form

Your registration is complete when all of the following items are returned to Academy of Russian Ballet to **6520 Edenvale Blvd. Suite 114 Eden Prairie, MN 55346**

- 1) Completed and signed registration form
- 2) Registration fee: **ARB** Students \$25.00, Not **ARB** students \$45.00
- 3) Summer camp fee.

Please, make checks payable to the Academy of Russian Ballet

Student Name:

Full Name: _____
Birth Date: _____ Girl/Boy: _____
Camp Registering for: _____ Week(s) and Date(s) of the Camp 1. _____ 2. _____

Family Information:

Mother's Name: _____
Address: _____ City: _____ Zip _____
Home Phone: (____) _____ Work Phone: (____) _____
Cell Phone: (____) _____ E-mail address _____

Father's Name: _____
Address: _____ City: _____ Zip _____
Home Phone: (____) _____ Work Phone: (____) _____
Cell Phone: (____) _____ E-mail address _____

Emergency Contact: _____
Relation _____ Phone: (____) _____

Family and Emergency Information

Allergies, medications, or any other medical/physical conditions that we should know about:

Insurance company _____
Policy #: _____
Child's doctor: _____ Phone: (____) _____
Child's dentist: _____ Phone: (____) _____

Acknowledgement of Risk and Waiver of Liability

My child has no physical conditions that would limit his/her participation in dance activities. I hereby give permission for my child to participate in activities at the Academy of Russian Ballet, to work on all of the necessary equipment, and to be transported to and from additional dance activities. In case of emergency the Academy of Russian Ballet staff has my permission to use their judgment with regard to treatment until I can be contacted. Moreover, I hereby authorize any qualified physician contacted to proceed with treatment. In case of emergency, I understand that my child will be transported to the nearest hospital or preferred hospital: _____ by the local emergency resource if rescue squad deems necessary. I understand that I will be responsible for all medical and emergency transportation expenses. It is understood that in some medical situations, the staff will need to contact the emergency resources before contacting the parent or other adult acting on the parent's behalf. **Warning:** catastrophic injury can result from improper conduct of this activity. I accept full responsibility on behalf of my child for his/her use of any and all apparatus, appliances, facility, instruction, privilege or service whatsoever, owned, provided and operated by ARB at his/her own risk and shall hold ARB, its shareholders, members, governors, officers, employer's representatives and agents harmless from any and all loss, claim, injury, damage or liability sustained or incurred by my child resulting there from. I understand and accept that touching in a professional manner in order to provide proper correction is a necessary part of dance instructions. I grant permission for photographs taken at the Academy of Russian Ballet to be used by ARB in displays or for advertising purposes. I understand that no personal information will be associated with any photographs without my consent and that no compensation is offered. I also understand that all photographs taken by the ARB are the property of the Academy of Russian Ballet. If student registers for summer camp and takes only one or a few classes during camp, the full tuition will be charged. Fees and tuition are non-refundable and non-transferable.

Signature of Parent

Date

*6520 Edenvale Blvd. Suite 114 • Eden Prairie, MN 55346-2564
Phone: (612) 501-9208 • www.academyofrussianballet.com*