



2016 SUMMER INTENSIVE ACCEPTANCE PACKET
JULY 3 - JULY 28 Monday- Friday 9:00am – 3:00pm

Acceptance Requirements: All applicants must submit the acceptance form to Kirova Ballet by May16 to secure their spot in the Summer Intensive Program. Form received after May 16 will be processed on first come, first served basis.

Intermediate (9 –13 years old),
Advanced Intensive (14 –19 years old)
Full Program \$1400 (4 weeks), Registration fee \$100
Weekly Program \$400, Registration fee \$25 (for each week)

A non-refundable \$500 Tuition Deposit and Registration Fee \$100 are due with the acceptance packet. Packet submitted without payment will not be considered complete and a spot in the program will not be guaranteed. Please note that Summer Intensive deposit must be received by May 16 in order to secure placement in Kirova Ballet Academy's Summer Intensive. Tuition must be paid in full by June 24, 2017.

Full program _____ Weekly Program _____ / _____ / _____
Tuition: _____ Registration Fee _____ Total Due _____ Check Number _____
Charge Credit Card for \$ _____ Charge my card on after this date: _____
Card Number: _____ Expiration: _____ Sec. code _____
Name Appears on Card: _____ Street Address+ Zip _____
Signature: _____ Date _____

All deposits and Registration fees are non-refundable once they have been paid to Kirova Ballet Academy. Please keep in mind that the study of dance comes with the risk of injury. Those students who suffer a major and debilitating injury preventing any dancing after full payment, but prior to June 1, 2016 may submit a letter of explanation from a licensed physician; at that time, Kirova Ballet Academy will consider a refund of tuition or negotiation of credit of tuition fees toward the following year's tuition.

All requests for refunds must be in writing to www.academy@kirova-ballet.com. All refunds will be issued after August 30, 2016. Payments for tuition can be made by check or money order.

Make Checks Payable to: Kirova Ballet Academy

REGISTRATION FORM

INTERMEDIATE _____

ADVANCED _____

Age _____

Date ____/____/____

Last Name _____ First Name _____

Parent/Guardian name(if under 18) _____

Emergency Contact Phone number _____ e-mail address _____

Medical Concerns (i.e. Asthma, diabetes)* _____

Previous Dance Training Information

Previous Schools _____

Years on pointe _____

Years of Training _____

Payment Information

\$ _____ Registration Fee (Due with application) \$ _____ Deposit (Due by May 16, 2017)

\$ _____ Full Tuition (Due by June 24, 2017)

\$ _____ Weekly Tuition (Due on the 1st day of ISP), Dates from _____ to _____

Total with Registration fee(s) enclosed \$ _____ Check Number(s) _____

* Permission to participate in classes offered by Kirova Ballet Academy (KBA) is given for minor child or me as shown above.

I assume all risk involved in taking classes, including travel to and from KBA, and hold harmless KBA, its employees and its consultants, from all liability. Please be aware that KBA may take photographs of its dancers for use in promotion of the studio. If this is not your wish, please attach a letter stating this to your registration form.

** Use one form per student. Please fill out the full form. Registration fee must accompany form. Deposit must be paid by May 16th, 2017. **These fees are non-refundable and non-transferable.** Please make checks payable to Kirova Ballet Academy.

Please initial here _____

*** Placement for ISP is at the sole discretion of KBA Artistic Director(s) and is based on ability **NOT AGE!** Only the Artistic Director (s) will make decisions on the appropriate level. **NO EXCEPTIONS WILL BE MADE!**

Parent/ Guardian signature _____ Date _____