

Summer Dance Intensive - 2018 Registration Form

Star City School of Ballet at 305 East Calhoun St., Salem, Va. 24153

June 25 - 30 9 am - 5pm
Beginner levels
Preparatory 2 - Intermediate 1A
Cost: \$300 week and/or
6 evening classes \$100

June 25 - 30 9 am - 5pm
Intermediate & Advanced
Intermediate 1B - Advanced
Cost: \$300 week and/or
6 evening classes \$100

More Information

Pedro Sazlay: pedro@svballet.org

Phone: 540-387-3978

Carol Jessee: carol@svballet.org

www.svballet.org

Name Age

Address

City State Zip Code

Phone Number E-mail

Parents or Guardian

Dance School

Years of Dance Ballet Pointe Modern Jazz Tap

My payment includes : \$300 wk Advanced/Int or Beginner \$100 6 evening classes card

Make checks payable to: Southwest Virginia Ballet

Mail to: Southwest Virginia Ballet; PO Box 3275; Roanoke VA 24015

Release

In consideration of the Southwest Virginia Ballet's (SVB) grant of an audition and/or the selection to participate in a performance, rehearsal, or class staged by SVB, I hereby waive any and all claims for myself and my heirs for any child or ward in my care or custody so participating (the "Minor" named above) against SVB and each of its agents, officers, and employees, for injury or illness which may directly or indirectly result from my participation. And I further agree to save and hold said parties harmless and agree to indemnify each if said persons against all liability for and loss, cost, injury, or damage to persons or property which may arise by virtue of the undersigned engaging in the activities associated with SVB. Furthermore, the undersigned do hereby expressly stipulate and agree to indemnify and forever hold harmless SVB, Star City School of Ballet, their successors and assigns, employees, representatives, agents, officers, and directors, against loss from any and all further claims, demands or actions in law or equity that may hereafter at any time be made or brought by the said Minor or anyone on behalf of said minor for the purpose of enforcing a claim against them for damages on account of any injuries sustained in consequence of participation in this audition or any related SVB activity by the Minor or participant. Furthermore, I state that the Minor is in proper physical condition to participate with SVB. Furthermore, it is agreed that any participant may be photographed or videotaped in Audition, Rehearsal or Performance at the direction of SVB and agreed that such photographs or videos may be used by SVB for promotional and archival purposes.

Signature of Parent or Guardian

Current Date