

BRANDYWINE BALLET 2025 SUMMER INTENSIVE REGISTRATION FORM

Student Name	Student Cell Phone # (Student Cell Phone # (Optional) Student Email (Optional)	
Name of Parent Responsible for Account	Parent Cell Phone #	Parent Email	_
Name of Parent 2	Parent 2 Cell Phone #	Parent 2 Email	_
Age Date of Birth	2024-2025 School Nan	ne & Grade Level	
Name of current dance studio		# years of ballet training	
form will be accepted unless 2 separate cor All dancers must have pointe experien	ntacts are listed. ce to attend this program		٧c
To register, please place an "X" n	ext to the week(s) yo	u would like to attend:	
Intermediate/Advanced Level 9:00 am to	1:00 pm – Ballet Technique,	, Pointe Technique, Variations	
Week 1: July 7 th - 11 th Week 2: July 14 th – 18 th Week 3: July 21 st – 25 th	Melissa Rector Valerie Amiss Meredith Rainey	\$350 \$350 \$350	
Week 4: July 28 th – August 1 st	Meredith Rainey	\$350 Total Amount Due: \$	
Contract, and I release Brandywine Ballet from rehearsal, performances, or any other program negligence or willful misconduct on the part of	all claims relating to any injurie s associated with the Summer Brandywine Ballet. If dance instruction may somet	es and conditions contained in the 2025 Summer Intensive es which may occur in connection with auditions, class, Intensive, except for illness or injury resulting from gross times require a teacher to touch me/my child. I also	
I, as the parent or legal guardian of the student videotaped, and/or interviewed during the cou	named below, hereby grant porse of the Summer Intensive by	ermission for my child or ward to be photographed, y Brandywine Ballet or any authorized agents, and consent to tograph, and words indefinitely for the purposes of promoti	
Consent Signature of Responsible Party		Date	_
automatically be charged on your credit card b	by June 1st, if a check is not rec	t registration and no later than May 1. 2025. The balance we seived in the office by that date. The deposit and payment ll be given for any reason. Please make all checks payable to	
If paying by credit card, please clearly print yo	ur information below.		
Please Print Name as it appears on card			_
Credit Card Number	Expiration	Date Security code Zip Code	