

SCHOOL OF THE  
GRAND RAPIDS **BALLET** COMPANY

**2012 PRE-PROFESSIONAL & JUNIOR  
SUMMER INTENSIVE REGISTRATION FORM**

**Student Name:** \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

Student Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_

Email: \_\_\_\_\_ Phone(C/H): \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Mother/Guardian Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ H Phone: \_\_\_\_\_ C Phone: \_\_\_\_\_

**Father/Guardian Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ H Phone: \_\_\_\_\_ C Phone: \_\_\_\_\_

**In the Event of an Emergency Contact:** \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone 1. \_\_\_\_\_ Cell Phone2. \_\_\_\_\_

**PROGRAM (Select one below)**

- 5-week Pre-Professional (12-19 yrs old) - \$1,700
  - 1 Week Pre-Professional - \$400 per week
    - Week 1    Week 2    Week 3
    - Week 4    Week 5
  
- 5-week Junior (9-11 yrs old) - \$800
  - 1 Week Junior - \$200 per week
    - Week 1    Week 2    Week 3
    - Week 4    Week 5

**PROGRAM TOTAL: \$** \_\_\_\_\_

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**HOUSING** (students must be at least 15 years of age)

- \$2,000 - 5 week stay with host family (must apply by April 1<sup>st</sup>)
- \$400 - 1 week stay with host family (must apply by April 1<sup>st</sup>)
- None needed

**HOUSING TOTAL** (if applicable): \$ \_\_\_\_\_

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**T-SHIRT** (included in the 5-week program, \$15 if purchased separately)

*Adult sizes*

- Small    Medium    Large    X-Large

**T-SHIRT TOTAL** (if applicable): \$ \_\_\_\_\_

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**GRAND TOTAL: \$** \_\_\_\_\_ (new students, add \$20 registration fee)

**METHOD OF PAYMENT**

- Cash       Enclosed Check, # \_\_\_\_\_ (please make checks payable to Grand Rapids Ballet Company)
- Credit Card

Cardholder's Name: \_\_\_\_\_

CC Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_ Sec. Code \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

**PLEASE RETURN COMPLETED FORMS WITH PAYMENT TO:**

School of the Grand Rapids Ballet  
 ATTN: Amanda Sekelsky, School Administrative Director  
 341 Ellsworth SW  
 Grand Rapids, MI 49503