

Manhattan Youth Ballet
Summer Application 2010



1) Student Name _____
2) Date Of Birth: _____ 3) Age: _____ Gender: _____ Height: _____
Month / Day / Year

3) Parents Name: _____

4) Home Address: _____
Street Apt#
City State Zip

b) Occupation: _____

c) Bussiness Address: _____
Street Suite
City State Zip

5) Contact Information:
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Fax: _____

Parent's Email: _____ @

Student's Email: _____ @

6) DANCE TRAINING:

Present dance school: _____

Number of years of training: _____ Classes per week: _____

What summer programs you have attended in the last two years? _____

Did you attend Manhattan Youth Ballet 2009 Intensive? YES NO
If yes in which Level were you placed ? _____

8) AUDITION METHOD I will attend the audition March 7, 2010
My DVD/VHS is enclosed My DVD/VHS will follow
A \$80.00 dollar processing fee will apply to audition by DVD/VHS

*** 2 photographs are required in order to audition -- 1 headshot and 1 in first arabesque***

I understand that after the MYB term has begun, should my daughter/son, for whatever reason, become unable to attend or she/he withdraws, or is dismissed for any reason as determined solely by the directors, or is absent from school, or fails to attend classes, I am obligated to pay the entire fee, without deduction or refund.

However, tuition, not including deposit, will be refunded if the student withdrawns one week (5 business days, Monday-Friday) before the opening of the school (August 16, 2010) for a medical reason and with a physician's notification.

Signature and Release

We understand the rules and regulations of Manhattan Youth Ballet and will adhere and obey to all said rules and regulations.

Students Signature _____ Parents Signature _____ Date _____