Edmonton School of Ballet Summer Dance Intensive – August 8-19, 2017

3rd floor, 8205 – 90 Avenue NW Edmonton, AB T6C 1N8

Guest Instructors: Vanessa & Stéphane Léonard

EARLY BIRD REGISTRATION

To receive a 10% discount on your Summer Dance Intensive fees, register and pay in full by March 17th, 2017.

SHOW DAY: SATURDAY, AUGUST 19th @ MYER HOROWITZ THEATRE

Dancers will have the opportunity to perform in our "Summer Revue". This fast-paced, exciting demonstration is the culmination of two weeks of hard work by students and staff, and is the highlight of the session!

Group	CLASS(ES)	HOURS	FEE
Α	These groups comprise of	9:00-5:00	\$850
В	RAD Inter Foundations to Advanced 2		
С	Cecchetti 6 to Advanced 2		
D	These groups comprise of	9:15-2:15	\$625
Е	RAD 3-6	OR	
	Cecchetti 2-6	12:30-5:30	
F	Junior 4 & Ballet Progressions 5	9:15-1:30	\$550
	RAD 2 & Cecchetti 1		
G	Junior 2 & 3	9:30-1:30	\$500
	RAD 1		
Н	Junior 1 & Beginner 6-9	12:00-2:00	\$300
	RAD Primary		
I	Nursery & Primary	10:45-11:45	\$200
	Pre-Primary & Beginner 4-5		

Week #1 Tues – Sat (inclusive)
Week #2 Mon – Fri (inclusive)
Show Day – Saturday, August 19th

REFUND POLICY

Refunds are considered for medical reasons only and will be calculated from the date of request (Full weeks only). Requests must be submitted in writing accompanied by a doctor's note.

INSTRUCTORS INCLUDE:

Vanessa & Stéphane Léonard, Krista Soleski, Shelby Benak, Lindsay White-Thornton, Anne McCready, Cally Kuebler & Julie Homister.

REGISTRATION FOR FALL CLASSES – BEGINS IN MAY

Classes fill up quickly!----Call today to have your e-mail added to our distribution list to receive more information as soon as it's available.

At the time of registration you will be placed in a level by our artistic staff and emailed a schedule prior to the summer school. Levels are subject to change. Please read our level placement agreement on the 2nd page. Placement classes occur on the first day.

EDMONTON SCHOOL OF BALLET – SUMMER DANCE INTENSIVE REGISTRATION FORM 2017

Student's Name:		_ Phone:	
DOB: MM/DD/YR:		_ Health Care #:	
Parent's Name:		_ Parent's Email:	
Current Ballet Level:	Cecchetti	RAD	Other (Please specify)
Last Exam Taken:		Current Dance Scho	ol:
Current Teacher:		_	
Group #:			
Credit Card #:		Expiry Date:	
Signature:			
			t for the Intensive. Each student is evaluated and placed in one of the inually assessed to ensure placement in the correct level.
are final. Parents should not phone or contact	t ESB questioning the level placement or	requesting that a stu	riewed. Any level changes made during the first week of the sessions udent be moved. Parents and students are asked to trust the judgment e to bring out the best in each of his or her students in each class.
YOUR SIGNATURE BELOW INDICATES THAT YO	OU HAVE READ AND WILL ABIDE BY THE	PLACEMENT POLICY.	
Office Use Only:			
Receipt #:	Date:	Paymei	nt Method: