

# 2024 SUMMER INTENSIVE

## REGISTRATION FORM



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 Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

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 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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 Parent/Guardian Phone Numbers \_\_\_\_\_

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 Mother & Father/Legal Guardian Full Name(s) \_\_\_\_\_

The Above Address is (please circle one):    Mother's        Father's        Both Parents'

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 Email Address(es) \_\_\_\_\_

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 Any known allergies or medical issues CMB should be aware of? \_\_\_\_\_

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 Emergency contact if parent cannot be reached \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Schedule**  
 Full Day:            9:00 – 4:30  
 Half Day AM:       9:00 – 12:15  
 Half Day PM:       1:00 – 4:30

**Select Weeks Attending**  
 (Choose all that apply)

July 8 - 12     full day  
                    half day AM  
                    half day PM

July 15 - 19     full day  
                    half day AM  
                    half day PM

July 22 - 26     full day  
                    half day AM  
                    half day PM

Aug 5 - 9         full day  
                    half day AM  
                    half day PM

**Pricing**

| If payment received BY May 15 |         |          |       | If payment received AFTER May 15 |         |          |       |
|-------------------------------|---------|----------|-------|----------------------------------|---------|----------|-------|
| Full Day                      |         | Half Day |       | Full Day                         |         | Half Day |       |
| 1 week                        | \$400   | 1 week   | \$240 | 1 week                           | \$450   | 1 week   | \$265 |
| 2 weeks                       | \$750   | 2 weeks  | \$455 | 2 weeks                          | \$850   | 2 weeks  | \$505 |
| 3 weeks                       | \$1,050 | 3 weeks  | \$670 | 3 weeks                          | \$1,250 | 3 weeks  | \$745 |
| 4 weeks                       | \$1,400 | 4 weeks  | \$885 | 4 weeks                          | \$1,600 | 4 weeks  | \$985 |

- You may register for any combination of full and half day weeks.
- The discounts for multi-week only apply to weeks of the same registration type.
  - Example: 2 half day weeks and 2 full day weeks at lower rate costs \$455 + \$750
  - Example: 1 half day week and 3 full day weeks at higher rate costs \$265 + \$1,250
- Contact the office with any questions, 608-422-2003.

**Payment in full and signed policy form are due with registration. Checks made out to CMB.**  
 Financial aid is available. Contact CMB for information.  
 Return form and check to: Central Midwest Ballet  
 2831 Parmenter St., Ste 290, Middleton, WI 53562        **AMOUNT ENCLOSED \$\_\_\_\_\_**

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 Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

CMB offers financial aid for all programming. Please contact the office for more information.  
 608-422-2003 | [contact@cmballet.org](mailto:contact@cmballet.org) | [www.CMBallet.org](http://www.CMBallet.org)



# SUMMER PROGRAM POLICY ACKNOWLEDGEMENT

## **IMAGE RELEASE**

We respect our families' privacy. If you have any special circumstances, please feel free to bring these to the attention of the office.

- Central Midwest Ballet Academy may, from time to time, take video and/or photographs of my dancer. We may use these photographs for publicity purposes such as but not limited to: the website, Facebook, and news releases.

## **LIABILITY ACKNOWLEDGEMENT**

- CMB is not responsible for any injury or illness to my dancer while participating in any program sponsored by CMB.
- I release and indemnify CMB from any claim, damage, or suit whatsoever which may arise from personal injury, illness, or property damage suffered while at CMB.

By signing below, I acknowledge that I have read, understand, and agree to the above information:

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Parent/Guardian Signature

Date