



Child's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_ Cell # \_\_\_\_\_

Caretaker's Name \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

**ALL CLASSES FOR SUMMER CAMP 2020 TERM:**

Begin the week of July 13th and end on August 14th.

**TO RESERVE A SPOT FOR YOUR DANCER, PLEASE COMPLETE THE FOLLOWING AND SUBMIT PAYMENT BY APRIL 3, 2020 FOR EARLY REGISTRATION SPECIAL PRICING:**

- Complete this registration form and return
- Make payment via:
  - PayPal on our website - www.bronxvilleballet.com
  - Check made payable to Bronxville Ballet. Checks and registration may be mailed to Bronxville Ballet c/o Ana Dimas, 6 Alden Place #3D, Bronxville, NY 10708. (There are no refunds, but credits are transferable.)

**WAIVER**

Although every effort is made to create a safe environment, I acknowledge that dancing is an activity which involves certain risks. I assume risks of participating in Bronxville Ballet and waive, release and discharge Bronxville Ballet, Ana Dimas and all related parties from all liability for any damage, loss or injury arising out of my child's participation in Bronxville Ballet. There are no refunds but credits can be transferred. I have read and understand this waiver and release and I fully understand its contents.

I hereby grant Ana R. Dimas the right the use, re-use, publish and re-publish photographic portraits or pictures of the minor or in which the minor may be included in whole or in part for the express purpose of marketing, promoting and creating the public image of her dance instruction courses and studio(s).

The portraits or pictures may be used in print, electronic or web-based forms.

I waive any right that I or the minor may have to inspect or approve the finished product or products.

I release, discharge, and agree to have harmless Ana R. Dimas' photographer, Jay Wilson.

I warrant that I am of full age and have every right to contract for the minor in the above regard. I state further that I have read the above authorization, release, and agreement, prior to its execution and that I am fully familiar with the contents. This release shall be binding upon me and my heirs, legal representatives and assigns.

\_\_\_\_\_  
Name of Minor(s)

\_\_\_\_\_  
Guardian

\_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Date

**Please check your week(s) below:**

- SUMMER CAMP WEEK 1**  
JULY 13-17, 2020  
Sleeping Beauty
- SUMMER CAMP WEEK 2**  
JULY 20-24, 2020  
Swan Lake
- SUMMER CAMP WEEK 3**  
JULY 27-31, 2020  
Don Quixote
- SUMMER CAMP WEEK 4**  
AUGUST 3-7, 2020  
Coppelia
- SUMMER CAMP WEEK 5**  
AUGUST 10-14, 2020  
Midsummer Night's Dream

**\$325 PER WEEK**

**SPECIAL:**

**Pay by APRIL 3rd, receive:**

**25% OFF** any 4th week of camp  
or

**25% OFF** any 4th week plus

**40% OFF** any 5th week of camp!

**PAYMENT TOTALS**

- 1 WEEK OF CAMP**  
\$325.00
- 2 WEEKS OF CAMP**  
\$650.00
- 3 WEEKS OF CAMP**  
\$975.00
- 4 WEEKS OF CAMP**  
\$1218.75 - *Early Registration Pricing*
- 5 WEEKS OF CAMP**  
\$1413.75 - *Early Registration Pricing*