



Application Form
2020 H.O.T. Summer Intensive Form
June 15-19 2018 9:00AM-4:00PM

General Information:

Dancer Name:	Home Phone:
Street Address:	
City/State/Zip:	
Date of Birth (mm/dd/yyyy)	Grade Completed in School:
1-Parent Name:	Email:
Daytime Phone:	Cell Phone:
2-Parent Name:	Email:
Daytime Phone:	Cell Phone:
In case of Emergency, Contact Name:	
Phone Number:	Relationship to Dancer:
Dancer's Primary Dance Instructor Name:	
Studio Name:	Studio Phone Number:
Studio Address:	

1. Tuition & Payment: Register before April 30th to be eligible for the EARLY BIRD discount.

Pre-Company & Company Levels Rising 3rd Grade + ALL Dancers are required to AUDITION	June 15-19, 2020	<input type="checkbox"/> Early Bird \$325 Registered by April 30th	<input type="checkbox"/> \$350
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2. Health Information: Attach a copy of insurance card (front & back) to this application.

Do you have a chronic medical condition, allergy or handicap? <input type="checkbox"/> YES <input type="checkbox"/> NO If, YES, please describe:	
Do you take any medication? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name of medication & describe:	
Physician's Name:	Phone:

3. Financial Information: (make checks payable to South Georgia Ballet)

Deposit: A \$100 *non-refundable* deposit is required for *all* applicants and due with this Application Form. Your deposit will be applied toward your tuition payment and may not be used toward any discounts.

Early Bird Discount: Application and deposits received on or before April 30, 2020 are eligible for this discount

Weekly Tuition: Early Bird Special \$325 if registered by April 30th OR \$350.

Remaining Balance: Full payment must be received on or before **June 4, 2020.**

4. Required Photos: (not required for SGB dancers)

E-mail or mail a current and clear **headshot** and **1st arabesque** photo to SGB no later than **June 4, 2020**.

5. Teacher Recommendation Form: (not required for SGB dancers)

Each dancer must have a recommendation form submitted by a dance instructor who is familiar with his/her dance technique and training. **These MUST be submitted directly to SGB by the instructor.** More than one teacher recommendation may be submitted, but only one is required.

RULES AND REGULATIONS: Rules and regulations will be strictly enforced. SGB staff reserves the right to remove any dancer from the school and all activities for the first offense. NO refunds will be given to any dancer removed from the camp for violation of the Rules and Regulations, no exceptions.

1. Out-of-town dancers may not drive or be a passenger in any automobile unless operated by a member of the SGB staff. Should an out-of-town dancer drive to Thomasville, that dancer must deposit his/her keys with the SGB director or assistant director. Local dancers may drive to the campus with parental approval, but may not furnish transportation for other dancers unless written parental approval is received in advance and signed by all parents involved.
2. In Georgia, it is illegal for persons under the age of 18 to possess or use tobacco products and alcohol – these are **not** permitted at any time during the camp.
3. Dancers will conduct themselves in a mature and responsible manner befitting the responsibility you have accepted in representing your school. Any violation of behavior or curfew will result in the dancer being sent home.

DANCER AND PARENT AGREEMENT:

I, the Dancer _____, understand that printed Rules and Regulations will be distributed on opening day and agree to abide by them and to be responsible for any damages to the building and/or its furnishings. I, the Parent/Guardian, _____ hereby give permission to the physician selected by the school director to order x-rays, routine tests and treatment for my child. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the school director to hospitalize, secure proper treatment/standard first aid for, and to order injection, anesthesia and/or surgery for my child as named above. I will make arrangements for my child to return home safely in the event that he/she does not follow the rules set forth in the RULES AND REGULATIONS. I give permission to South Georgia Ballet to use any photographs and videos taken during the Summer Intensive Dance Program in promotional materials including, but not limited to Facebook and DVD's.

Parent Signature _____	Date _____	Dancer Signature _____	Date _____
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All classes are held at our studios in the Thomasville Center for the Arts located at 600 E. Washington Street.
Dancers must arrive ready to dance no later than 8:45am and bring a lunch daily. **Company level classes are held 9:00am-4:00pm.**
Late registrations will be accepted but are not guaranteed on the Monday of each week at 8:30am only.

OFFICE USE ONLY: Date Application Received:	Early Bird Discount <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Completed Application Form <input type="checkbox"/> \$100 Deposit or Full Tuition <input type="checkbox"/> Copy of Health Ins. Card (front/back)	
<input type="checkbox"/> Teacher Recommendation* <input type="checkbox"/> Dancer Photos* (*not required for SGB dancers)	

Mail Completed Application, Deposit and/or Full Payment to: SGB, P.O. Box 1192, Thomasville, GA 31799
For more information, visit www.southgeorgiaballet.org or contact Morgan Rhoden at 229.228.9420 or morgan.rhoden@southgeorgiaballet.org