SUMMER INTENSIVE REGISTRATION Please Print

Name		
Address		
City/Zip		
Phone(s)		
E-mail		
Current Studio		
Age		
Years of Study: Ballet	Pointe	
Jazz	Modern/Contempo	rary
Level Int	Adv (check one)	
	nent and Repertory Cas ined by Guest Faculty.	ting
WOF	RKSHOP TUITION	
	ired for performance)	
Paid before April 18		\$700
☐ Paid after April		\$750
Full Workshop w/o Repertoire Paid before April 18		\$625
☐ Paid after April 18		\$675
One Week of Worksl	nop (circle week)	
☐ Paid before Apr		\$375
☐ Paid after April 18		\$425
☐ Individual classes		\$25
☐ Individual professional rate		\$15
Method of Payment Cash Check #		

Scholarship opportunities are available. Please contact Ginger Herrera for details.

☐ CC / Authorization #

Summer Intensive

mediate Two weeks of rigorous dancers ced for advan training and



Mon-Sat 9:30-4:30 HOURS

June 8-20 CLASSES

PERFORMANCE

intermediate and advanced Our Intensive Workshop is a special opportunity for performance confidence. students whose desire is to dramatically improve their technical skills and

brings to the classroom the knowledge, motivation college, those who dream to dance professionally, téachers will benefit those who aspire to dance in dance. Exposure to many styles of dance taught Concentrated study with exceptional teachers and expectation of the professional world of by a variety of special guest artists and staff





STUDIO FACULTY

Evelyn Ireton, Director Ginger Herrera, Associate Director Kenneth Epting, Program Coordinator Houston Academy of Dance West University Dance Centre

ATTIRE

Black leotard, pink tights, hair in a bun for ballet. All other classes black leotard, with black tights, black dance shorts, or black jazz pants.

Black tights, and white T-shirt for boys.

Bring your own mat for core conditioning classes.

Ballet
Pointe
Jazz
Horton
Hip Hop
Contemporary
Core Conditioning
Musical Theatre

281.497.4783 www.hadance.com



MANDATORY INSURANCE INFORMATION

Insurance Company	
Policy Number	
Group Number	
Name of Policy Holder/Insured	
Please list any allergies.	
I hereby give my permission to F Dance personnel to authorize an medical treatment that may be re named participant during the HA Workshop from June 8-20, 2015. It responsible for any and all charge care and medical treatment.	ny minor emergence equired by the abov D Summer Intensivunderstand that I an
I release and hold Houston Acader that they may utilize, the faculty, t directors and staff harmless from while participating in any and all a	heir agents, board c any and all liabilitie
Print Student Name	
Student Signature	
	Date
Print Parent/Guardian Name	
	Date
Parent/Guardian Signature (if studer	nt is under 18)
Emergency Contact	
Name	

Phone _____