



# REGISTRATION FORM

SUMMER OF DANCE 2024

June 17 - August 9

(707) 765-1771

[www.obriencota.net](http://www.obriencota.net)

[obriencota@gmail.com](mailto:obriencota@gmail.com)

**STUDENT NAME:** \_\_\_\_\_ M/F: \_\_\_\_\_ Birthdate: \_\_\_\_\_

School attending: \_\_\_\_\_ Currently in grade or entering grade: \_\_\_\_\_

Student cell phone: \_\_\_\_\_ Student email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Guardian #1/Emergency Contact Name:**  Parent,  Spouse,  Step-parent,  Grandparent,  Legal Guardian

Name: \_\_\_\_\_ Parent email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

**Guardian #2:**  Parent,  Spouse,  Step-parent,  Grandparent,  Legal Guardian

Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email (if different; put down only if she/he/they want newsletters and billing info): \_\_\_\_\_

**Dance Experience:** New Students only (check all that apply and provide length of training and location)

Ballet:	Pointe:	Lyrical:
Hip Hop:	Tap:	Team:
Jazz:	Musical Theater:	Contemporary:
Conditioning:	Other:	

In addition to a weekly class schedule, we are offering special camps and intensives that require reservations with a deposit of \$100 or full payment to reserve a space. Full payment is due on or before the first day of class. Customize your summer by completing this Registration Form and returning with a check or payment to PAYPAL [obriencota@gmail.com](mailto:obriencota@gmail.com)

Programs without minimum enrollment may be canceled, in which case a full refund will be issued.

**LIABILITY RELEASE:**

As a participant or as a parent/guardian of a participant in the programs of O'Brien Center of the Arts, I recognize and acknowledge there are certain risks of physical injury and I agree to assume the full risk of any injuries, damages, or loss which I or my child/ward may sustain as a result of participating in any and all activities connected to or associated with this program. I agree to waive or relinquish all claims for injuries, damages, or loss which I or my child/ward may have arising out of, connected with, or in any way associated with O'Brien Center of the Arts and its staff, agents, or officers.

I further give permission for myself or my child/ward to be photographed and or videotaped during any classes, rehearsals, or performances. I understand any of which may be used for purposes of promoting O'Brien Center of the Arts through newspaper ads/articles, brochures/flyers, and the studio's website without releasing the participant's name. I have read and fully understand the above waiver and release all claims.

**OTHER POLICY ACKNOWLEDGEMENTS:**

I agree to provide O'Brien Center of the Arts 2 weeks notice when dropping a class.

I understand that O'Brien Center of the Arts reserves the right, at any time, to cancel or change classes, teachers, days, and times as necessary. Classes with less than 4 enrolled will be postponed until enrollment is 4 minimum.

**Please list any allergies or medical conditions:**

**REGISTRATION AND TUITION CALCULATION**

**PLEASE RESERVE A SPACE FOR THE FOLLOWING PROGRAMS:**

PROGRAM NAME \_\_\_\_\_ DATES: \_\_\_\_\_

FULL WEEK TUITION: \_\_\_\_\_ OR DAILY RATE (SPECIFY)  
DAYS TO ATTEND: \_\_\_\_\_ TOTAL DAILY RATE: \_\_\_\_\_

PROGRAM NAME \_\_\_\_\_ DATES: \_\_\_\_\_

FULL WEEK TUITION: \_\_\_\_\_ OR DAILY RATE (SPECIFY)  
DAYS TO ATTEND: \_\_\_\_\_ TOTAL DAILY RATE: \_\_\_\_\_

PROGRAM NAME \_\_\_\_\_ DATES:: \_\_\_\_\_

FULL WEEK TUITION: \_\_\_\_\_ OR DAILY RATE (SPECIFY)  
DAYS TO ATTEND: \_\_\_\_\_ TOTAL DAILY RATE: \_\_\_\_\_

PROGRAM NAME \_\_\_\_\_ DATES: \_\_\_\_\_

FULL WEEK TUITION: \_\_\_\_\_ OR DAILY RATE (SPECIFY)  
 DAYS TO ATTEND: \_\_\_\_\_ TOTAL DAILY RATE: \_\_\_\_\_

PROGRAM NAME \_\_\_\_\_ DATES: \_\_\_\_\_

FULL WEEK TUITION: \_\_\_\_\_ OR DAILY RATE (SPECIFY)  
 DAYS TO ATTEND: \_\_\_\_\_ TOTAL DAILY RATE: \_\_\_\_\_

CLASS CARDS MAY BE USED FOR ANY CLASSES THROUGHOUT THE SUMMER, INCLUDING THOSE THAT COINCIDE WITH CAMPS.

8 hrs.        \$160.00  
 12 hrs.      \$240.00  
 16 hrs.      \$300.00  
 24 hrs.      \$440.00  
 32 hrs.      \$570.00

TOTAL TUITION DUE FOR PROGRAM(S)	
TOTAL TUITION DUE FOR CLASS CARD(S)	
LESS DISCOUNT: (Family 10%)	
<b>BALANCE:</b>	
INSURANCE PAYMENT (annual): NEW STUDENTS	
<b>TOTAL BALANCE DUE:</b>	
DEPOSIT/FULL PAYMENT PAID, check# _____	
DEPOSIT/FULL PAYMENT PAID by PAYPAL/CC	
<b>REMAINING BALANCE</b>	

## The Holiday Gift Summer class requirements for casting 2024

Pre-Ballet and Ballet 1	8 hours
Ballet 2	16 hours
Ballet 3	24 hours
Ballet 4/5/6 pointe roles	32 hours

Credit is given for ballet classes only and all camps with ballet classes are also credited as seen below.

Priority casting is given to dancers who fulfill their class requirements. Only after these dancers are cast will we be able to include any dancer who would like to be in the production.

Performances will be at Spreckels' Performing Arts Center November 15 - 17, 2024. This is going to be an exciting year!

SUMMER CAMPS AND INTENSIVES (GO TO ENRICHMENT KIDS FOR DETAILED INFORMATION)

<u>DATE</u>	<u>CAMP/INTENSIVE</u>	<u>LEVEL</u>	<u>BALLET CREDITS</u>
June 17 - 21	COMPETITION week	Beg.	4
		Int.	6
		Adv.	8
June 24 - 28	PARIS	Adv.	8
July 1 - 5	DISNEY	Beg.	4
July 8 - 12	BOOTCAMP	ALL	5
July 22 - 26	PARIS	Beg./Int.	6

