

Summer Dance Intensive Application for Admission

Tell Us About Yourself:

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Name of Applicant:					
Address:					
City:	State:		Zip:		
Country:	e-mail address:				
Telephone:	Age:		Birth	day:	
Note: If you are under 18, you must have a parent's ap	proval to submit this application.				
Tell Us About Your Dance Experien	ce:				
Name(s) of Current Studio(s) and Instruct	cor(s):				
How many years have you been dancing?					
What types/styles of dance do you study,	/have you studied?				
Do you take pointe? Yes No N/A	if yes, how many years have	ve you b	een on	pointe?	
How many hours of ballet do you take we	eekly? How many	hours of	pointe	weekly?	
How many hours of dance class total do y	ou take weekly?				
List any Summer Intensives you have atte	nded, including locations and	years:			
Do you have any injuries or limitations the	at we should be aware of?	Yes	No	If yes, please explain:	
Are you interested in private lessons whil	e at our intensive? Yes	No			
By signing below, you are confirming that all informatic date, and have a parent or legal guardian sign and date Northeast Academy of Dance, to be applied to NEAD Su appropriate ballet photo if desired with their application name, and a self-addressed, stamped envelope with ad within two weeks of receipt by NEAD.	as well. Enclose this application, and \$2 ammer Dance Intensive 2009 tuition if a on. Photos and/or other materials will no	15 non-refu ccepted to ot be return	our progr	e (checks only, made out to The am). Applicants may submit clearly labeled with applicant's	
Signature of Applicant:		Date:			
Signature of Parent/Legal Guardian:		Date:			
Send Completed Application to: Northea	st Academy of Dance, NEAD	Summer	Dance	Intensive, 4200	
California Drive, P.O. Box 681, Oscoda, N	11, USA 48750				