**Registration Form**

Pre-Professional Summer Intensive - Ages 12-18 – July 11-15, 2016

**.**

Please print legibly

Student Name: Parent Name:

Address: Apt. #:

City: State: Zip:

Home Phone: Cell Phone:

Email:

Date of Birth:

Please check appropriate item: Please write totals below

* Full Intensive – One week and performance $450.00

**$**

Registration Fee $15.00 Non-refundable $ 15.00

**Balance Due** $

**Total Enclosed (Payable to Kim Robards Dance) $**

**Please carefully read all information for important deadlines.**

**In the event you are inquiring after a deadline has passed please call 303-825-4847 or send an email to: sumint@kimrobardsdance.org**

**Please return all materials and payment to: Kim Robards Dance, 9990 East Colfax Avenue, Aurora, CO 80010**

**You may pay via credit card by emailing** [**LaRana@KimRobardsDance.org**](mailto:LaRana@KimRobardsDance.org) **to set a time for LaRana to process your card.**

**Additional registration information and participation forms may be required once participant has completed the initial registration.**