



**Instruments Ballet Summer Intensive
Registration
August 11-14, 2025**

Welcome dancer!

We are excited to have you join us this year for four days of dynamic dance training from our professional faculty. Our Intensive classes will include classic ballet technique and pointe (pointe prep for our younger dancers), contemporary, jazz, tap, stage, choreography, creative worship, and Bible study. This will be a special time of growing spiritually.

Your registration will be complete when we have received all of the following:

- Registration application completed and signed**
- Activity Release Form completed and signed**
- 50 registration fee**
- Tuition paid in full by June 5**
EARLY BIRD 375 / Regular 400 / *w/ host home ADD 100
- Photographs email or mailed**
(headshot and first arabesque)

Registration fee:

- 50**

Tuition: Paid in full by June 5

- Early Bird tuition! 375 – MUST register by March 1**
- 400 – tuition *AFTER* early bird deadline**
- *100 add for host home – with an Instruments Ballet family, ages 10-18 in pairs, Aug 11-14**

Roommate requested: _____

Dancer’s full name: _____

Parent/legal guardian first and last name: _____

Relationship to dancer: _____

Parent/guardian contact phone: _____

Parent/guardian email: _____

Mailing address: _____

Required photos:

- Ballet headshot**
- First arabesque**

T-shirt size:

- child large**
- adult small**
- adult medium**
- adult large**
- adult XL**

Getting to know you: *(to be completed by the dancer)*

Birthdate: (month, day, year)

How old will you be at the time of intensive?

Dietary restrictions:

Allergies:

What is the name of your dance studio?

Years of ballet training?

Years en pointe?

Other dance disciplines/dance background:

What areas of dance do you hope to improve during intensive?

Do you attend church? If yes, what church?

Favorite Bible verse:

And why?

How can we be praying for you before you arrive?

Besides dance what else do you do for fun?

Favorite book character, and why?

Favorite movie character, and why?

Favorite snack:

Commitment:

I have read the above information and agree to the terms of this registration.

STUDENT signature:

PARENT/GUARDIAN signature:

Questions? Contact instrumentsoc@outlook.com or 971-413-2730
19077 S Beaver creek Rd, Oregon City, OR 97045

**INSTRUMENTS BALLET / INSTRUMENTS CHURCH
MEDICAL, LIABILITY, AND ACTIVITY RELEASE FORM**



(Mandatory: You must agree to all statements before participating in any Instruments Ballet activity)

Form to be completed by someone who is 18 years of age or older, all parents, and/or guardians

I consent for myself and/or my child listed below to participate in any activities relating to taking any classes, performances, performance setup, performance take down, event, party, dance intensive, workshop, or any other activities that I participate in with Instruments Ballet and or Instruments Church.

In case of medical need or injury, I authorize Instruments Ballet / Instruments Church to arrange for medical or dental services for me and/or any of my children listed below. I agree that any such expense will be completely my obligation.

I, (please print full name) _____, individually, or in my capacities as parent, or guardian waive, release, and indemnify Instruments Ballet / Instruments Church and all of its agents*, directors, officers, employees, and volunteers (collectively, "Released Parties") from all demands, claims, or liability, in law or in equity, that have arisen or may arise from any Instruments Ballet / Instruments Church activity, including my participation in any production, class, workshop, program setup, or program take down with Instruments Ballet / Instruments Church at any point now or in the future, and that involve any damage, loss, or injury to me, my spouse, any of my children, my property, or the property of any of my children. In the same capacities, I promise not to sue any of the Released Parties for any such demands, claims, or liability. This waiver, release, indemnification, and promise not to sue do not apply to claims of criminal conduct or gross negligence.

I understand that Instruments Ballet / Instruments Church may take photographs and or video of me and my family in the course of its activities, and I grant Instruments Ballet / Instruments Church permission to use such materials in a manner Instruments Ballet / Instruments Church deems appropriate.

This Activity Release Form is in effect for any activities including classes, workshops, performance, rehearsals, production setup, production take down, fundraiser, events, party, dance intensive, workshop, or activities that I, or any of my children, may participate in. This form is revocable, prospectively only, in writing signed by me that bears the date that the revocation is delivered to Instruments Ballet / Instruments Church.

I understand that there is an element of risk in this activity and agree to follow all instructions, rules, and regulations. I certify that I have and will maintain accident and medical insurance for any and all activities that I participate in with Instruments Ballet / Instruments Church.

Participants signature	date	Parent or Legal Guardian signature	date
		<i>(if participant under 18 years of age)</i>	

Participants name PRINTED	Parent or Legal Guardian name PRINTED
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Participants personal information to be kept confidential
Best contact phone number: _____

Home address (include city, state, and zip) _____

Primary physicians name _____ Phone number _____

Medical Insurance Company _____ Policy number _____

Insured's name _____ Insured's date of birth _____

Required: Attach a photocopy of the insured's current medical insurance card.

Emergency contact _____ Phone _____

(This is the person we will call if you suffer a medical emergency) Relationship _____

Authorized medications _____

List any and all allergies (food or other) _____

Describe any injuries sustained in the last year _____

Describe any medical conditions and or infections that we should be aware of _____

Are you on a special diet of any kind? (vegan, vegetarian, etc.) If yes, please explain _____

**Including, but not limited to, all representatives and locations used by Instruments Ballet / Instruments Church for rehearsals, performances, outings.*

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Keep checklist on page 5 for your planning purposes.



Instruments Ballet Summer Intensive 2025

(keep this page for your planning purposes)

When: **August 11, 8:15am through August 14, 6:30pm**

Where: **19077 S Beavercreek Rd, Oregon City, OR 97045**

Contact info: instrumentsoc@outlook.com or 971-413-2730

Pack your bags!

Dress code and what to bring:

- black leotard (plain) -- *no 3/4 or long sleeves*
- pink tights
- pink ballet shoes
- pointe shoes (*if applicable*)
- black ballet skirt
- character skirt
- black shorts (mid-thigh)
- jazz shoes
- tap shoes (*if possible — limited sizes are available to borrow*)
- warm-ups (pants, jacket)
- water bottle
- snacks
- lunch
- Bible
- notebook
- pen or pencil

SAMPLE daily schedule: (8:15am-6:30pm)

Morning:	Creative worship & Bible study
	Ballet technique
	Contemporary
	Jazz (or other dance discipline)
Lunch	<i>Bring a sack lunch!</i>
Afternoon:	Choreography
	Variations
	Conditioning/Leaps & turns
Dinner	<i>Catered by Instruments Ballet!</i>
	Guest speaker

“So use your body as an Instrument to do what is right for the glory of God.”

Romans 6:13

instrumentsOC.com