

Artistic Directors: Mara Vinson & Oleg Gorboulev

2024–25 School Year Registration Form

Class Level		
Student	Age	_ Date of birth
Parent/Guardian if under age 18_		
Where did you hear about Olympi	ic Ballet School?	
Address		
City	Stat	eZip
Phone: cell	2nd	
Email	2nd	
School_		Grade
Physician	I	Phone
Medical Information		
I will not send my child to the studio, for 72 hours after any fever has resoi liable for any injury or illness sustain	lved to return to the studio. I w	udio in case of illness, and I will wait vill not hold Olympic Ballet School
I give my consent for photos/video fo Ballet School.	ootage to be taken of my studer	nt at the full discretion of Olympic
I understand that registration and tu must be cancelled. I understand that		
Signature		Date
Please return form with NON-R Olympic Ballet School. Class pla		
Please check if you are interested	d in Olympic Ballet Theatre	's Trainee Program.
Must be 18 yrsold and/or a high	h school graduate to apply.	