



## Summer School 2012

### Application Form

Surname:	
First Name:	
Address:	
Postcode:	
Telephone No.:	
Email Address:	

Date of Birth		Age	
Most Recent Ballet Examination			
Result		Date	

Course applied for (*please tick the week you would like to attend*):

Summer: Week 1	2 <sup>nd</sup> - 6 <sup>th</sup> July 2012	<input type="checkbox"/>
Summer: Week 2	9 <sup>th</sup> - 13 <sup>th</sup> July 2012	<input type="checkbox"/>
Summer: Week 3	16 <sup>th</sup> - 20 <sup>th</sup> July 2012	<input type="checkbox"/>

Please enclose a deposit of £80 for each week that you wish to attend.  
The balance of £370 per week must be paid by the **31<sup>st</sup> May 2012**.

I ENCLOSE A DEPOSIT OF £\_\_\_\_\_ (**£80/week**)

Signature of parent (or student if over 16) \_\_\_\_\_

Please return to:

**Ballet West (Holiday Schools)**  
**Ichrachan House,**  
**Taynuilt,**  
**Argyll PA35 1HP**