



Viktor Yeliohin, Director  
214 W. Grant Street, Lancaster, PA 17603

## Summer Camp Registration 2022

Dancer's Name: \_\_\_\_\_

Parents/Guardians Names: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (Parent #1 cell) \_\_\_\_\_ (Parent #2 cell) \_\_\_\_\_

Email Address: \_\_\_\_\_

Age as of June 1, 2022: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Dance School: \_\_\_\_\_ Years of Ballet: \_\_\_\_\_

**Current Ballet Level (circle):** Vaganova 2,3 Intermediate Advanced Pointe

**Please select the camp(s) for which you are registering:**

\_\_\_\_\_ **June Summer Intensive – June 20 – 24, 2022 (M-F) 9:30AM – 5:00PM**

For students ages 10-18 (Vaganova 2,3, Intermediate, & Advanced levels)

**Cost: \$395.00 for the week**

**\*Non-refundable \$100 deposit due 4/1/22 to hold your place in the camp, remaining balance due 5/20/22**

Classes in Ballet, Pointe, Variations, and Contemporary/Modern

\_\_\_\_\_ **July Summer Intensive – July 11 – 15, 2022 (M-F) 9:30AM – 5:00PM**

For students ages 10-18 (Vaganova 2,3, Intermediate, & Advanced levels)

**Cost: \$395.00 for the week**

**\*Non-refundable \$100 deposit due 4/1/22 to hold your place in the camp, remaining balance due 7/11/22**

Classes in Ballet, Pointe, Variations, and Contemporary/Modern

**SAVE THE DATE:**

**August Nutcracker Camp – August 8 – 12, 2022 (M-F) 9:00AM – 5:00PM**

**Invitation only:** For students cast as Snow, Little Snow, Marzipan, Waltz of the Flowers during the May 14, 2022, Nutcracker Audition. **Cost: \$350.00 for the week**

Please bring your registration form to the studio or mail registration form to the following address:

**Viktor Yeliohin  
139 Springbrook Court  
Lancaster, PA 17603**

Email: [vyballet@gmail.com](mailto:vyballet@gmail.com)

Website: <https://www.vyballet.com>

Phone: (717) 419-6688

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Student's Signature if 18 Years, or Older)

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**RELEASE FORM**

**Dancer's Information:**

Dancer's Name \_\_\_\_\_ Address \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Emergency Contact Person: *Emergency Contact's Names (Names of Parents or Legal Guardians):***

Name \_\_\_\_\_ Phone #1 \_\_\_\_\_ Name \_\_\_\_\_ Phone #2 \_\_\_\_\_

**Medical Release:** The undersigned, on behalf of the Dancer and/or him or herself, certifies that the Dancer is in good health and may participate in all activities at **VYIBA**. In case of an emergency requiring medical treatment, and the legal guardian (if the Dancer is under 18 years of age) is not immediately available, the undersigned hereby authorizes Viktor Yeliohin IBA, and/or its employees and/or agents, to obtain medical care and treatment for the Dancer and the undersigned accepts payment responsibility for any such care and treatment. \_\_\_\_\_ ***Initials of Legal Guardian***

**Liability Release:** The undersigned, on behalf of the dancer and/or him or herself, gives consent for the dancer to participate in the **VYIBA** performance and all activities associated with **VYIBA** and is aware that dance training and the athletic exercises associated with it may place unusual stress on the body and carry the risk of physical injury that includes, but is not limited to, muscle strains and tears, broken bones, or even death. On behalf of the Dancer and/or him or herself, the undersigned assumes the risk in consideration of the benefits derived from participation in **VYIBA**. Furthermore, on behalf of Dancer and/or him or herself, the undersigned waives all rights, causes of actions, and releases any and all claims by or from the Dancer that may arise against Viktor Yeliohin, Director, Viktor Yeliohin IBA or **VYIBA**, or while in the act of being transported to and from such activities, (including any and all consequential damage claims which the Dancer and/or the undersigned may be entitled to recover from, without regard to the negligence of the parties). The undersigned does hereby agree to indemnify and hold harmless, release and discharge the building owners Viktor Yeliohin IBA, staff, assistants, agents, representatives, instructors, directors and/or owners. Furthermore, the undersigned agrees to provide health insurance for the Dancer or guarantee payment of all medical expenses incurred as a result of **VYIBA** activities. \_\_\_\_\_ ***Initials of Legal Guardian***

**Media Release:** Photographs and videotape footage of **VYIBA** are sometimes used in Viktor Yeliohin IBA publications, local newspaper, television ads and on Viktor Yeliohin IBA's web page. If the undersigned, on behalf of the Dancer, and/or him or herself, does not wish to have the Dancer appear in such photographs and videotape footage, the undersigned may submit a written request to Viktor Yeliohin IBA. If no written request is received, it is understood that the undersigned, on behalf of the Dancer, and/or him or herself, gives Viktor Yeliohin or Viktor Yeliohin IBA permission to use such photographs and videotape footage of the Dancer for such use. \_\_\_\_\_ ***Initials of Legal Guardian***

The undersigned has read the above Medical Release, Liability Release, and Media Release and agrees to such Releases and all other regulations, rules, dress codes and requirements of **VYIBA** and Viktor Yeliohin IBA.

\_\_\_\_\_  
**Parents' Signature**  
*(or signature of Legal Guardian if the Student is under 18 years of age)*

\_\_\_\_\_  
**Date**

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