

International Summer Intensive Registration

The Summer Intensive Registration is also available online at www.dkbodybalancing.com

Student Name:		Age:	
	Citizenship:		
Parent/Guardian Name:			
Student Address:			
City:			
Student Cell Number:	Emergency Cell Number:		
Parent/Student Email:			
Teacher Name:	Studio Name:		
Studio Address:			
City:			
Studio Work Number:		Teacher Cell N	umber:
Studio Email:			
Check the appropriate box fo Regional City Attended: Student Full Tuition \$600			0 Student Full Scholarship \$0
Observer Fee for Teachers	Only \$100	Гotal \$	
Payment on arrival in US dollar	s OR		
Payment method Venmo at dkb	odybalance@	<u>ogmail.com</u> (Dolly Ke	lepecz).
Full Name:			
participants. An online registration is not a g not responsible or liable for any injuries sus personal items that may be lost or stolen or Summer Intensive will be the property of UI	Certificate stating guarantee of space tained on the premises, du NLV and allowed s	the reason for the inability to e in the program unless tuition nises or during any other acti ring the Summer Intensive. A sole, exclusive, and unlimited	attend. A medical release is required for all n due is paid. University of Nevada, Las Vegas is vity or performance; and not responsible for any ny photography and/or video taken during the
I fully understand and agree to	tne terms sta	ted above:	

Signature of Parent/Responsible Person and for Credit Card Authorization