

**Associate Experience Events**

**Background Information**

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| The Royal Ballet School is delighted to invite young dancers aged between 8 - 10 as at 31st August 2014 (currently in Years 3,4, and 5) accompanied by a parent and/or their dance teacher to attend special events around the country to experience a typical Junior Associate lesson.  A dance teacher and/or one parent per young dancer may observe the 2 hour class which will be followed by a question and answer session. We advise attendees to arrive no more than 30mins prior to the start of the lesson.  Young dancers should arrive at the event underchanged (with their regular ballet clothes underneath their outdoor clothes).  Places are on a first come first served basis, and we highly recommend submitting an application form as soon as possible before the closing date. Letters of confirmation of attendance will be sent out after the closing date  The lessons will be split into two groups. One for students aged 8 – 9.6\*yrs, one for students aged 9.7\* – 10.11 yrs (as of 31st August 2014). *Subject to the number of applications received per age group.*  ***Every young dancer must be accompanied by their dance teacher and/or one parent***  **Fees** Parent/Guardian with Student £30  Dance Teacher with Student £30    Dance Teacher without Student £20  Dance Teacher and Parent/Guardian with Student £50 | | |
| **Event Venue** | **Close date for Applications** | **Event Date** |
| **Cornwall**  *Truro and Penwith College,*  *College Road,*  *Truro, Cornwall TR1 3XX* | **Friday 22 November** | **Sunday 8 December** |
| **Birmingham**  *Birmingham Royal Ballet,*  *Birmingham Hippodrome, Thorp Street,*  *Birmingham B5 4AU* | **Friday 17 January** | **Sunday 2 February** |
| **Leeds**  *Yorkshire Dance Centre,*  *3 St Peter’s Square,*  *Leeds LS9 8AH* | **Monday 3 February** | **Thursday 20 February** |
| **Cardiff**  *Royal Welsh College of Music & Drama*  *Castle Grounds, Cathays Park*  *Cardiff CF10 3ER* | **Friday 7 February** | **Sunday 23 February** |
| **Contact Details**  Outreach Events, (Associate Experiences)  The Royal Ballet School, 46 Floral Street, Covent Garden, London WC2E 9DA  Email: [outreachevents@royalballetschool.co.uk](mailto:outreachevents@royalballetschool.co.uk)  Tel: +44(0)20 7845 7064 / 63 Fax: +44(0)20 7845 7066 | | |



**Associate Experience Events**

**Student Application Form**

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| Student Name |  | | Gender Choose an item. | |
| Date of Birth |  | | Age at **31st August 2014** | Yrs       Mths |
| Event Applied for  *Please see overleaf for event dates and venues* | | Cornwall  Birmingham  Leeds  Cardiff | | |
| Home Address (including postcode) | |  | | |
| Telephone no  +international code if not UK | |  | | |
| Mobile no  +international code if not UK | |  | | |
| Email | |  | | |
| **Dance Information** | |  | | |
| Ballet Teacher’s Name | |  | | |
| Current Dance School | |  | | |
| Last Ballet Examinations Passed | | Method:  Grade:  Result:  Date: | | |
| Grade/Level currently being studied | |  | | |
| Parent/Guardian Name | |  | | |
| Parent/Guardian Mobile No | |  | | |
| I will be accompanied by  **(Name of Parent/Guardian)** | |  | | |
| And/or name of Dance Teacher  **(Please fill in teacher’s details overleaf)** | |  | | |

Child Protection

* In the unlikely event that The School is unable to contact me, I give permission for my son/daughter to have emergency medical treatment.
* I understand that on occasions, it may be necessary for a teacher to physically adjust parts of a student’s body in a professional manner in order to assist the student’s understanding of an exercise.
* The Royal Ballet School will accept responsibility of young dancers taking part in events while at the venues, on event days. However, I understand that The Royal Ballet School does not accept responsibility for the young dancers once they have left the premises.

I agree to my child participating in Outreach Events and to The Royal Ballet School’s teaching practices.

Please authorise your agreement to the above statements       Parent/Guardian Authorisation

Programme details are correct at time of publication, however could be subject to change.

Registered Charity: 214364 Registered in England (547018) Registered Office: 46 Floral Street, Covent Garden, London WC2E 9DA



**Associate Experience Events**

**Dance Teacher’s Application Form**

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| **PLEASE COMPLETE AND SEND**  Application, payment form, (email preferred):  Outreach Events, (Associate Experiences)  The Royal Ballet School, 46 Floral Street, Covent Garden, London WC2E 9DA  Email: [outreachevents@royalballetschool.co.uk](mailto:outreachevents@royalballetschool.co.uk)  Tel: +44(0)20 7845 7064 / 63 Fax: +44(0)20 7845 7066  **Letters of confirmation will be sent after the closing dates for each event** | |
| **Continued Professional Development**  *This event can qualify as part of your CPD training.*  *Please tick here if you would like to receive a certificate of attendance following the event.*  **Aims and Objectives**  The aim of this event is to provide an insight into The Royal Ballet School’s Junior Associate Programme, which provides further training for students aged 8 – 10years who have an interest in vocational training, through observation of a Royal Ballet School Junior Associate lesson, (2hrs), with participating students who are currently not on a Royal Ballet School Associate course.  **Objectives**   * Develop an understanding of pre-vocational training * Develop understanding for benchmarking student’s potential for pre-vocational training * Provide a platform for discussion and exploration into teaching young students with an interest in vocational training. | |
| Name |  |
| Home Address (including postcode) |  |
| Telephone no + international code if not UK |  |
| Mobile no + international code if not UK |  |
| Email |  |
| Name and Address of Dance School |  |
| **Please tick as applicable**  I shall be attending with a student £30  I shall be attending with a student & parent/guardian £50  I shall be attending without a student £20 | |

***Please feel free to photocopy this form and pass it to your colleagues, assistant teachers and student teachers***

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| **PLEASE COMPLETE AND SEND**  Application, payment form (email preferred):  Outreach Events (Associate Experiences)  The Royal Ballet School, 46 Floral Street, Covent Garden, London WC2E 9DA  Email: [outreachevents@royalballetschool.co.uk](mailto:outreachevents@royalballetschool.co.uk)  Tel: + 44(0)20 7845 7064 / 63 Fax: + 44(0)20 7845 7066  The number of student places for each event is limited and applications will be dealt with in order of receipt. Letters of confirmation will be sent to successful applicants after the closing dates. Please Note: You may apply for more than one event with this form. | | | |
| **Event Venue** | **Close date for Applications** | **Event Date** | **Applied for** |
| **Cornwall** | **Friday 22 November** | **Sunday 8 December** |  |
| **Birmingham** | **Friday 17 January** | **Sunday 2 February** |  |
| **Leeds** | **Monday 3 February** | **Thursday 20 February** |  |
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| --- | --- | --- | --- |
| **Name** |  | | |
| Parent/Guardian with Student  Dance Teacher with Student  Dance Teacher without Student  Dance Teacher and Parent/Guardian with Student | | | £30  £30  £20  £50 |
| **PAYMENT METHOD** UK cheque (British £ Sterling only) made payable to The Royal Ballet School. Please tick Note: Eurocheques not accepted  Credit Card *2% will be added to the final amount for credit card transactions*  Debit Card *0.3% will be added to the final amount for debit card transactions*  ***Note: Visa/Mastercard Credit and Debit Cards only accepted*** | | | |
| **PAYEE DETAILS** | | | |
| Payee / Cardholder’s name | |  | |
| Payee / Cardholder’s address  (including postcode if UK) | |  | |
| Telephone no  +international code if not UK | |  | |
| Email | |  | |
| **CREDIT / DEBIT CARD DETAILS**  Please note 2% wil be added to Credit Cards and 0.3% to Debit Cards to cover our own costs | | | |
| Card Type  (2% will be charged if no box is ticked) | | Visa Debit Mastercard Debit  Visa Credit Mastercard Credit | |
| Card Number | |  | |
| Security Code  (final 3 digits on magnetic strip) | |  | |
| Expiry Date | | / | |
| **AMOUNT PAYABLE** | | GBP £ | |
| I authorise The Royal Ballet School to charge the above amount to my credit/debit card once a place has been confirmed on the event.  Cardholder’s Authorisation       Date | | | |