



CHARLOTTE BALLET ACADEMY®
LOCATION CHANGE REQUEST FORM
 2017/2018 REGISTRATION

REQUEST # _____

Student's Name: _____

Parent's Name: _____

Level for 2016/2017: (select one)

Preparatory Division

- Creative Movement
- Pre Ballet

Open Division

- Beginning Ballet
- Youth Ballet

Primary Division

- Level 1
- Level 2
- Boys Dance

Intermediate Division

- Level 3
- Level 4

Advanced Division

- Level 5

Current Location: Center For Dance Charlotte Country Day School

Classes Taken:

- | | | |
|---------------------------------|------------------------------------|---|
| <input type="checkbox"/> Ballet | <input type="checkbox"/> Modern | <input type="checkbox"/> Student Ensemble |
| <input type="checkbox"/> Jazz | <input type="checkbox"/> Character | <input type="checkbox"/> Pointe |

Level for 2017/2018: (select one)

Preparatory Division

- Creative Movement
- Pre Ballet

Open Division

- Beginning Ballet
- Youth Ballet

Primary Division

- Level 1
- Level 2
- Boys Dance

Intermediate Division

- Level 3
- Level 4

Advanced Division

- Level 5

Desired Location: Center For Dance Charlotte Country Day School

Classes:

- | | | |
|---------------------------------|------------------------------------|---|
| <input type="checkbox"/> Ballet | <input type="checkbox"/> Modern | <input type="checkbox"/> Student Ensemble |
| <input type="checkbox"/> Jazz | <input type="checkbox"/> Character | <input type="checkbox"/> Pointe |

Reason for Location Change: _____

This form is to be completed and returned to ddoucet@charlotteballet.org between **Noon Wednesday, June 21** and **End of Day Tuesday, June 27**. Forms received outside of this time frame will not be considered. Families should register in their current location for the 2017/2018 year to ensure they have a place in the **Academy** prior to applying for a location change. Due to capacity limitations the **Academy** cannot guarantee location changes for everyone and these are granted on a first come, first serve basis. If a location change request is not granted the student should remain at their current location for the 2017/2018 year.

By signing below I understand that I am not guaranteed a spot at my desired location and that if the **Academy** is unable to grant my request that I will remain at my desired location.

Signature: _____

Date: _____

STAFF USE ONLY

Date Submitted: _____

Received: _____

Approved: _____