STEVEN & ELIZABETH WISTRICH, DIRECTORS

cityballet OF SAN DIEGO

Summer Intensive 2026 Application

Program Dates: July 13th through 31st, 2026

STUDENT INFORMATION

Student Name: _____
Please PRINT: *FIRST Name* *LAST Name* ❑ *Male* ❑ *Female*

Parent/Guardian Name: _____
(For Students Under 18 Years) *First Name* *Last Name*

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail Addresses: _____

Mobile Phone: _____ Home Phone: _____

Date of Birth: _____/_____/_____ Age (Yrs): _____ Height (Feet/Inches): _____ Weight (Pounds): _____
Month *Date* *Year*

Company or School Affiliation: _____ Total Years Dance Study: _____

Hometown: _____ T-Shirt Size: Women S☐ M☐ L☐ XL☐ /Men S☐ M☐ L☐ XL☐

PERMANENT MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

Address: _____

City: _____ State: _____ Zip Code: _____

APPLICATION REQUIREMENTS

1. Summer Intensive 2026 Application (this form)
2. Photo in 1st Arabesque on pointe
3. Recommendation letter from current ballet instructor
4. Approx. 10-minute video (such as a phone video recording) provided via a YouTube link containing:
   a. One side only of each barre exercise (plies, tendus, adagio, grand battement); and
   b. Center work (tendus, pirouettes, petit allegro, grand allegro); and
   c. Pointe work (either at the barre or in the center) or a variation from the classical repertoire on pointe
5. Audition Fee of $25 ❑ paid online ❑ check enclosed ❑ mailed
6. Deposit of $400*(optional) (*please check one below if applicable)*
   ❑ $425 check enclosed (includes audition fee) ❑ $400 check enclosed
   ❑ $425 check mailed (includes audition fee) ❑ $400 check mailed

**You may elect to wait to mail $400 deposit after you receive your audition results, however a spot in the program is not held until deposit is received.*

City Ballet of San Diego adheres to San Diego County's Health & Human Services Agency COVID-19 protocols.

DEPOSITS AND FEES

Non-refundable Audition Fee: $25.00
Non-refundable Tuition Deposit (*optional): $400.00
(Audition fee of $25 payable at the link on our website)

APPRENTICE AND STUDIO COMPANY

Consider me for position(s) in 2026-2027 season (check all that apply)

❑ Apprentice ❑ Studio Company

SIGNATURE

The information provided in this application is complete and correct. I understand and agree to the disclosures provided below.

Signature: _____
Summer Intensive Student Applicant *Date*

Signature: _____
Individual Responsible for Tuition *Date*

DISCLOSURES

Enrollment: Summer Intensive class sizes are limited: Advanced Level: 30 students; Intermediate II Level: 20 students; and Intermediate I Level: 10 students. Classes are filled based on date deposit is received by City Ballet. Applications are accepted until all spots are filled. If you are accepted into the program but no spaces are available, you will be placed on a waiting list and notified immediately when a spot opens. **Tuition:** Tuition for the 3-week Summer Intensive program is **$1,650 for Advanced and Intermediate II levels**, and **$1,350 for Intermediate I level**. A $400 **non-refundable** tuition deposit is required for a spot in the program to be held. The remaining tuition balance must be received by City Ballet no later than **June 1, 2026** and is non-refundable after May 15, 2026. **Tuition Payments: Accepted by personal check, cashier's check, or cash only.** There is a $25 fee for each bank charge incurred due to Insufficient Funds. **Audition Fee:** A **$25 non-refundable audition fee must accompany the application**, payable online or by check. **Refunds:** If you are not accepted into the program, your tuition deposit will be returned immediately. If you are placed on the waiting list but a space does not become available your deposit will be returned no later than Monday, July 13, 2026. If you are accepted into the program and cancel before May 15, 2026, any tuition payments made **excluding the $400 deposit** will be refunded. **If you cancel after May 15, 2026 for any reason, your deposit and any other tuition payments will NOT be refunded.**

MAIL COMPLETED APPLICATION, DEPOSIT/TUITION CHECKS AND AUDITION MATERIALS TO:
CITY BALLET OF SAN DIEGO, PO BOX 99072, SAN DIEGO, CA 92169 OR SCHOOL@CITYBALLET.ORG

(Office Use Only) Date _____ Amt Rec. $_____ Cash/CC/Check#_____ Received by _____ Level _____