



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## SOLO Registration Form

Please, FAX the Registration Form to one of the FAX numbers  
 TOKYO: +81-3-4496-4764 ▪ NEW YORK: +1-212-504-3246 ▪ VIENNA: +43-1-253-03330017  
 BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022 USA  
 E-mail: admin@ibsbp.org ▪ Website: www.ibsbp.org ▪ Telephone: +1-212-504-3246 ▪ Fax: +1-212-504-3246

<b>Dancer: First Name</b>		<b>Middle Name</b>		<b>Last Name</b>	
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
Ballet School Name					
Director: First Name		Middle Name		Last Name	
Ballet Teacher			Ballet Coach		
<b>Ballet School Contact Information:</b>					
Address					
City			State/Region		
Zip/Postal Code			Country		
Telephone		Fax		Mobile	
E-mail			Website		
<b>Dancer Contact Information</b>					
Address					
City			State/Region		
Zip/Postal Code			Country		
Telephone		Fax		Mobile	
E-mail					
<b>Ballet Entry Information</b>					
Title: Classical Variation 1					
Title: Classical Variation 2					
<b>PARTICIPATION FEE: USD \$175 — ALL INCLUSIVE — Includes All Communication, Processing and Participation Costs. Non-Refundable.</b>					
<b>* Payment Method — International — Bank Wire Transfer — Bank Wire Transfer Information:</b>					
Swift Code: WFBIUS68   Bank Name: Wells Fargo   Bank Account: ABA #: 121000248 Account #: 2000059162476					
Bank Account Holder: International Ballet Society   Bank Account Address: 590 Madison Avenue, 21st Floor, New York, NY 10022 USA					
Bank Branch Address: 420 Montgomery Street, San Francisco, CA 94104   For: Registration					
<b>* Payment Method — USA Only — Check, on USA Bank, or Money Order: Payable to: International Ballet Society  </b>					
Mail to: BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022   Telephone: +1-212-504-3246					
<b>Please, FAX a signed copy of the attached Release Agreement with the Registration Form.</b>					
<b>Signature:</b> Ballet School Director or Parent/Guardian					<b>Date</b>
<b>For Office Use Only</b>		<b>Date Received</b>		<b>Note</b>	



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## Release Agreement

I, parent or guardian of \_\_\_\_\_, who is \_\_\_\_\_ years old (the "Contestant"), authorize International Ballet Society ("IBS Presents"), a non-profit USA organization, the presenter of the BALLET PRODIGY The Global Virtual Ballet Competition, to use written materials bearing the name, audio recordings of, and/or audio/visual recordings of the Contestant (collectively, the "Works") in connection with the IBS Presents BALLET PRODIGY The Global Virtual Ballet Competition (the "Competition"), and to use such Works in any media (through exhibition, distribution, reproduction, publication, advertising, promotion, or otherwise), whether now know or hereafter developed, which may include the Contestant's name, signature, likeness, image, voice, and/or performances (collectively the "Materials").

IBS Presents may edit such Works as it desires and may use the Works or excerpts therefrom in any way. IBS Presents may use the Works and the Materials to promote and utilize the Works and for related purposes of advertising or trade. On behalf of the Contestant, I hereby waive all rights under privacy, publicity, defamation, and proprietary right relating to the recordings. IBS Presents may transfer or license any of it's rights hereunder.

This is a non-exclusive, perpetual and irrevocable license.

I acknowledge that the Contestant is competing to receive cash and other prizes in the Competition. I will not hold IBS Presents liable for the breach of any agreement previously made or herein made as a result of the Contestant's participation in the Competition or related events.

I represent that I am the legal guardian and/or parent of the Contestant and that I have the right, power and authority to enter into this Release Agreement, on behalf of the Contestant, I release, indemnify, and hold IBS Presents, its licensees, successors, and assignees harmless against all claims, liabilities, and expenses arising out of the breach of any of my representation or promises. I have read and understand the terms and conditions of this Release Agreement.

Name of Parent/Guardian (please, print): \_\_\_\_\_

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



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## PAS DE DEUX Registration Form

Please, FAX the Registration Form to one of the FAX numbers

TOKYO: +81-3-4496-4764 ▪ NEW YORK: +1-212-504-3246 ▪ VIENNA: +43-1-253-03330017

BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022 USA

E-mail: admin@ibsbp.org ▪ Website: www.ibsbp.org ▪ Telephone: +1-212-504-3246 ▪ Fax: +1-212-504-3246

Each PAS DE DEUX competitor must submit separate Registration Form, and will be evaluated individually.

In the PAS DE DEUX category, a male dancer as classical partner — above age 19 — is permitted to participate as a Non-Competitor.

<b>Dancer: First Name</b>						<b>Middle Name</b>						<b>Last Name</b>														
Date of Birth:		Day		Month		Year		Female: <input type="checkbox"/>		Male: <input type="checkbox"/>																
Ballet School Name																										
<b>Director: First Name</b>						<b>Middle Name</b>						<b>Last Name</b>														
Ballet Teacher									Ballet Coach																	
<b>Ballet School Contact Information:</b>																										
Address												City														
State/Region						Zip/Postal Code						Country														
Telephone						Fax						Mobile														
E-mail									Website																	
<b>Dancer Contact Information</b>																										
Address												City														
State/Region						Zip/Postal Code						Country														
Telephone						Fax						Mobile														
E-mail																										
<b>Ballet Entry Information</b>																										
Title: Classical PAS DE DEUX — Adagio and Coda																										
<b>Partner</b>																										
<b>First Name</b>						<b>Middle Name</b>						<b>Last Name</b>														
									Competitor <input type="checkbox"/>									Non-Competitor <input type="checkbox"/>								
<b>PARTICIPATION FEE: USD \$175 PER DANCER— ALL INCLUSIVE — Includes All Communication, Processing and Participation Costs. Non-Refundable.</b>																										
<b>* Payment Method — International — Bank Wire Transfer — Bank Wire Transfer Information:</b>																										
Swift Code: WFBIUS68   Bank Name: Wells Fargo   Bank Account: ABA #: 121000248 Account #: 2000059162476																										
Bank Account Holder: International Ballet Society   Bank Account Address: 590 Madison Avenue, 21st Floor, New York, NY 10022 USA																										
Bank Branch Address: 420 Montgomery Street, San Francisco, CA 94104   For: Registration																										
<b>* Payment Method — USA Only — Check, on USA Bank, or Money Order:</b> Payable to: International Ballet Society																										
Mail to: BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022   Telephone: +1-212-504-3246																										
<b>Please, FAX a signed copy of the attached Release Agreement with the Registration Form.</b>																										
<b>Signature:</b> Ballet School Director or Parent/Guardian												<b>Date</b>														
<b>For Office Use Only</b>						<b>Date Received</b>						<b>Note</b>														



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## Release Agreement

>> Each Dancer of the PAS DE DEUX must fill out and sign a separate RELEASE AGREEMENT <<

I, parent or guardian of \_\_\_\_\_, who is \_\_\_\_\_ years old (the "Contestant"), authorize International Ballet Society ("IBS Presents"), a non-profit USA organization, the presenter of the BALLET PRODIGY The Global Virtual Ballet Competition, to use written materials bearing the name, audio recordings of, and/or audio/visual recordings of the Contestant (collectively, the "Works") in connection with the IBS Presents BALLET PRODIGY The Global Virtual Ballet Competition (the "Competition"), and to use such Works in any media (through exhibition, distribution, reproduction, publication, advertising, promotion, or otherwise), whether now know or hereafter developed, which may include the Contestant's name, signature, likeness, image, voice, and/or performances (collectively the "Materials").

IBS Presents may edit such Works as it desires and may use the Works or excerpts therefrom in any way. IBS Presents may use the Works and the Materials to promote and utilize the Works and for related purposes of advertising or trade. On behalf of the Contestant, I hereby waive all rights under privacy, publicity, defamation, and proprietary right relating to the recordings. IBS Presents may transfer or license any of it's rights hereunder.

This is a non-exclusive, perpetual and irrevocable license.

I acknowledge that the Contestant is competing to receive cash and other prizes in the Competition. I will not hold IBS Presents liable for the breach of any agreement previously made or herein made as a result of the Contestant's participation in the Competition or related events.

I represent that I am the legal guardian and/or parent of the Contestant and that I have the right, power and authority to enter into this Release Agreement, on behalf of the Contestant, I release, indemnify, and hold IBS Presents, its licensees, successors, and assignees harmless against all claims, liabilities, and expenses arising out of the breach of any of my representation or promises. I have read and understand the terms and conditions of this Release Agreement.

Name of Parent/Guardian (please, print): \_\_\_\_\_

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



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## PAS DE TROIS Registration Form

Please, FAX the Registration Form to one of the FAX numbers

TOKYO: +81-3-4496-4764 ▪ NEW YORK: +1-212-504-3246 ▪ VIENNA: +43-1-253-03330017

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E-mail: admin@ibsbp.org ▪ Website: www.ibsbp.org ▪ Telephone: +1-212-504-3246 ▪ Fax: +1-212-504-3246

Each PAS DE TROIS competitor must submit separate Registration Form, and will be evaluated individually.

In the PAS DE TROIS category, a male dancer as classical partner — above age 19 — is permitted to participate as a Non-Competitor.

Competitor <input type="checkbox"/>				Non-Competitor <input type="checkbox"/>	
<b>Dancer: First Name</b>					
		<b>Middle Name</b>		<b>Last Name</b>	
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
Ballet School Name					
<b>Director: First Name</b>		<b>Middle Name</b>		<b>Last Name</b>	
Ballet Teacher			Ballet Coach		
<b>Ballet School Contact Information:</b>					
Address				City	
State/Region		Zip/Postal Code		Country	
Telephone		Fax		Mobile	
E-mail			Website		
<b>Dancer Contact Information</b>					
Address				City	
State/Region		Zip/Postal Code		Country	
Telephone		Fax		Mobile	
E-mail					
<b>Ballet Entry Information</b>					
Title: Classical PAS DE TROIS — Adagio and Coda					
<b>Partner 1: First Name</b>		<b>Middle Name</b>		<b>Last Name</b>	
<b>Partner 2: First Name</b>		<b>Middle Name</b>		<b>Last Name</b>	
<b>PARTICIPATION FEE: USD \$175 PER DANCER— ALL INCLUSIVE — Includes All Communication, Processing and Participation Costs. Non-Refundable.</b>					
<b>* Payment Method — International — Bank Wire Transfer — Bank Wire Transfer Information:</b>					
Swift Code: WFBIUS68   Bank Name: Wells Fargo   Bank Account: ABA #: 121000248 Account #: 2000059162476					
Bank Account Holder: International Ballet Society   Bank Account Address: 590 Madison Avenue, 21st Floor, New York, NY 10022 USA					
Bank Branch Address: 420 Montgomery Street, San Francisco, CA 94104   For: Registration					
<b>* Payment Method — USA Only — Check, on USA Bank, or Money Order:</b> Payable to: International Ballet Society					
Mail to: BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022   Telephone: +1-212-504-3246					
<b>Please, FAX a signed copy of the attached Release Agreement with the Registration Form.</b>					
<b>Signature:</b> Ballet School Director or Parent/Guardian				<b>Date</b>	
<b>For Office Use Only</b>		<b>Date Received</b>		<b>Note</b>	



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition Release Agreement

>> Each Dancer of the PAS DE TROIS must fill out and sign a separate RELEASE AGREEMENT <<

I, parent or guardian of \_\_\_\_\_, who is \_\_\_\_\_ years old (the "Contestant"), authorize International Ballet Society ("IBS Presents"), a non-profit USA organization, the presenter of the BALLET PRODIGY The Global Virtual Ballet Competition, to use written materials bearing the name, audio recordings of, and/or audio/visual recordings of the Contestant (collectively, the "Works") in connection with the IBS Presents BALLET PRODIGY The Global Virtual Ballet Competition (the "Competition"), and to use such Works in any media (through exhibition, distribution, reproduction, publication, advertising, promotion, or otherwise), whether now know or hereafter developed, which may include the Contestant's name, signature, likeness, image, voice, and/or performances (collectively the "Materials").

IBS Presents may edit such Works as it desires and may use the Works or excerpts therefrom in any way. IBS Presents may use the Works and the Materials to promote and utilize the Works and for related purposes of advertising or trade. On behalf of the Contestant, I hereby waive all rights under privacy, publicity, defamation, and proprietary right relating to the recordings. IBS Presents may transfer or license any of it's rights hereunder.

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I acknowledge that the Contestant is competing to receive cash and other prizes in the Competition. I will not hold IBS Presents liable for the breach of any agreement previously made or herein made as a result of the Contestant's participation in the Competition or related events.

I represent that I am the legal guardian and/or parent of the Contestant and that I have the right, power and authority to enter into this Release Agreement, on behalf of the Contestant, I release, indemnify, and hold IBS Presents, its licensees, successors, and assignees harmless against all claims, liabilities, and expenses arising out of the breach of any of my representation or promises. I have read and understand the terms and conditions of this Release Agreement.

Name of Parent/Guardian (please, print): \_\_\_\_\_

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



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## ENSEMBLE Registration Form

Please, FAX the Registration Form to one of the FAX numbers

TOKYO: +81-3-4496-4764 ▪ NEW YORK: +1-212-504-3246 ▪ VIENNA: +43-1-253-03330017

BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022 USA

E-mail: admin@ibsbp.org ▪ Website: www.ibsbp.org ▪ Telephone: +1-212-504-3246 ▪ Fax: +1-212-504-3246

Please, use the ENSEMBLE Registration Form for DUO ▪ TRIO ▪ ENSEMBLE 1 (4 to 9 Dancers) ▪ ENSEMBLE 2 (10 + Dancers of any size Ensemble)

Please, duplicate these pages for the data of additional number of Dancers of the Ensemble.

DUO <input type="checkbox"/>	TRIO <input type="checkbox"/>	ENSEMBLE 1 <input type="checkbox"/>	ENSEMBLE 2 <input type="checkbox"/>	Total Number of Dancers:	Form Page Number:
<b>Ballet School Name</b>					
Director: First Name		Middle Name	Last Name		
Address					
City			State/Region		
Zip/Postal Code			Country		
Telephone		Fax	Mobile		
E-mail			Website		
<b>Ballet Entry Title</b>					
					Time Length
Choreography by			Staged by		
Ballet Teacher			Ballet Coach		
<b>1. Dancer: First Name</b>					
		Middle Name	Last Name		
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
<b>2. Dancer: First Name</b>					
		Middle Name	Last Name		
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
<b>3. Dancer: First Name</b>					
		Middle Name	Last Name		
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
<b>4. Dancer: First Name</b>					
		Middle Name	Last Name		
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
<b>5. Dancer: First Name</b>					
		Middle Name	Last Name		
Date of Birth:	Day	Month	Year	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>
<b>PARTICIPATION FEE — ALL INCLUSIVE — Includes All Communication, Processing and Participation Costs. Non-Refundable.</b>					
<b>DUO / TRIO: USD \$125 per dancer</b>		<b>ENSEMBLE 1: USD \$100 per dancer</b>		<b>ENSEMBLE 2: USD \$75 per dancer</b>	
<b>* Payment Method — International — Bank Wire Transfer — Bank Wire Transfer Information:</b>					
Swift Code: WFBIUS68   Bank Name: Wells Fargo   Bank Account: ABA #: 121000248 Account #: 2000059162476					
Bank Account Holder: International Ballet Society   Bank Account Address: 590 Madison Avenue, 21st Floor, New York, NY 10022 USA					
Bank Branch Address: 420 Montgomery Street, San Francisco, CA 94104   For: Registration					
<b>* Payment Method — USA Only — Check, on USA Bank, or Money Order:</b> Payable to: International Ballet Society					
Mail to: BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022   Telephone: +1-212-504-3246					
<b>Please, FAX a signed copy of the attached Release Agreement with your Registration Form.</b>					
<b>Signature:</b> Ballet School Director or Parent/Guardian					<b>Date</b>
<b>For Office Use Only</b>					
			Date Received	Note	



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## ENSEMBLE Registration — Dancer Information Form

Please, FAX the Registration Form to one of the FAX numbers

TOKYO: +81-3-4496-4764 ▪ NEW YORK: +1-212-504-3246 ▪ VIENNA: +43-1-253-03330017

BALLET PRODIGY, 590 Madison Avenue, 21st Floor, New York, NY 10022 USA

E-mail: admin@ibsbp.org ▪ Website: www.ibsbp.org ▪ Telephone: +1-212-504-3246 ▪ Fax: +1-212-504-3246

Ballet School Name

Form Page Number:

<b>1. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>2. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>3. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>4. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>5. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>6. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>7. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>8. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>9. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age
<b>10. Dancer: First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
Address		City
State/Region	Zip/Postal Code	Country
E-mail	Telephone	Age

For Office Use Only

Date Received

Note



# IBS Presents BALLET PRODIGY 2012 ▪ The Global Virtual Ballet Competition

## Release Agreement

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Name of Parent/Guardian (please, print): \_\_\_\_\_

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