



Dear Students and Parents,

Thank you for choosing the Dayton Contemporary Dance Company's Summer Intensive Program. We are busy securing master instructors and guest choreographers who will make this an unforgettable summer session. For 6 consecutive days the teaching staff will craft coach you to your fullest potential.

Each day of the intensive offers something special and you'll have the opportunity to learn from world renowned staff. As you participate in daily classes, you will refine your technique while maintaining a vigorous schedule. DCDC repertory classes help develop versatility and dynamic stage presence, and encourage you find your individual artistic voice. Intensive participants will discover what life as a professional dance artist is like and discuss a myriad of topics with the DCDC dancers. New friends will be made through the shared love of dance and you will have the opportunity to show off what you've learned during an informal performance.

Please keep in mind that this is an intensive workshop so your attendance at each class and each rehearsal is mandatory. This will assure the full benefit of the program. Also to pay attention to the dress code and purchase any necessary items including footwear

Attached is Registration Packet. It includes several forms that should be printed and completed for return with your registration fee and deposit. All payments should be made in cash, money order, cashier's check. Personal Checks will not be accepted.

Please Make all checks payable to: Dayton Contemporary Dance Company

\$25.00 non-refundable fee must accompany registration

\$225.00 deposit due by May 15, 2015

Full tuition must be paid by June 15, 2015



- o Registration
- o Sample Schedule
- o Scholarship Application
- o Student agreement
- o What to Bring to make your stay a success
- o Rules and Regulations
- o Medical Release Form and Health Insurance information (Bring with you)
- o Liability Waiver (must be signed by parent and student)
- o Arrival/Departure information
- o Housing
- o Directions to DCDC studios
- o Contact Information

There is no audition process so register early! Space is limited. Again, thank you and we look forward to a very successful intensive!



DAYTON CONTEMPORARY DANCE COMPANY

Summer 2015 Registration Form

(Please print)

Student Name: (Last) _____
(First) _____

Male ____ Female ____

Date of Birth _____ Age _____

Have you had any serious health condition or injuries? ____ Yes ____ No

(If yes, please explain) _____

Present Dance School _____

Number of Years of Training _____

Parent/ Guardian Information:

Name(s) _____

Work phone (____) _____ Home phone (____) _____

Email Address _____



Parent address (if different from applicant)

How did you find out about DCDC:

Friend Poster Performance Ad Internet Flyer

Yellow Pages Mail Other: _____

I _____ intend to participate in the Dayton Contemporary Dance Company's 2015 Summer Intensive. I am aware that I am responsible for my own housing and transportation.

Signature _____

Date _____

PLEASE MAIL ALL REGISTRATION TO:

Dayton Contemporary Dance Company

840 Germantown Street

Dayton, OH 45402

Summer Intensive Director: Marlayna Locklear

\$25.00 non-refundable fee must accompany registration

\$225.00 deposit due by May 15, 2015

Full tuition must be paid by June 15, 2015



Summer Intensive (sample schedule)

Sunday July 12, 2015

12-5pm

Placement classes

Injury Prevention Seminar

Guest Choreographer Auditions

Monday July 13, 2015

8:30am-7pm

Master class Series

Ballet- Royce Zackery

Modern- Ray Mercer

Lunch

Hip Hop- Crystal Frazier

Panel discussion

DCDC Repertory

Guest Choreographers



Tuesday- Friday

8:00am Doors open

8:30am Ballet technique (2 hours)

11:00am Modern technique

12:30pm Lunch

1:30 pm Jazz/ African technique

3:00 pm DCDC Repertory Class

4:30 pm 15 min break

4:45 Guest Choreographers

7:00pm Finish

7:00-8:00 Open classes

7-8:30 pm Open classes

Past activities have consisted of master classes, informal performances, injury prevention seminars.



Scholarship Application

A limited number of scholarships are available. Scholarship support is highly competitive and awarded over a range of funding amounts that reflect the unique gifts each dancer brings to the program. Candidates must demonstrate a high caliber of technical and artistic ability.

To be considered, please forward the following:

- o Solo: 1-2 minutes
- o Format: link YouTube/ Vimeo

All footage should be of the dancer alone with no other bodies pre-sent in the video. Candidates must be in black leotard and black tights (ladies), black tank and black (fitted) pants or tights (men).

- o Dance Résumé

List dance styles studied and teachers who have influenced your training.

- o Personal Statement (250 words or less)

Indicate why you would like to work with Dayton Contemporary Dance Company

Applications are due April 15, 2015

Please email this information to: summerintensive@dcdc.org



Student Agreement

1. I agree to follow all written and verbal rules given by DCDC Staff for the duration of the program.
2. I understand that I am under the care of the DCDC staff. In addition, I agree to inform the DCDC desk staff/dorm staff of my whereabouts at all times.
3. I agree to arrive fully prepared at DCDC at least 15 minutes prior to my first class. Also, I understand being prepared includes being in dress code for each class.
4. I understand that DCDC and Wright State dorms are smoke-free facilities. No smoking is permitted at any time.
5. I understand that the use of any illegal drugs or alcohol is a federal offense. Therefore, I will not engage in either of these activities at any time.
6. I will not engage in any sexual acts with anyone else throughout the duration of the program.
7. I will not put myself or others in harm's way throughout the duration of the program. In addition, I will not bring, attain, use, or conceal any type of weapons.
8. I will respect the property of others by not stealing anything or using anything that is not mine without permission.

My signature below acknowledges that I have read and understand the rules above. I also understand that if I break any of these rules or disobey orders by DCDC staff members, I may be asked to immediately leave without refund at the sole discretion of the Executive Director of DCDC

Student Signature _____ Date _____

As a parent, my signature below means that I have read, understood, and discussed the above listed rules with my child.

Parent/Guardian Signature _____

(If Student is under 18) _____ Date _____



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WHAT TO BRING

- Students should come in each day dressed in full street clothes, not dance clothes. It is okay however, to have your dance clothes **UNDER** your street clothes.
- Dance Bag
- Appropriate attire for each class including foot wear – See General Rules and Regulations under Dress Code.
- Foot care – bring foot tape, nail clippers, Band-Aids, antiseptic, etc.
- Toiletries – The work day is very long. Please be considerate to others and wipe down between classes.
- Hand Towel
- Water Bottle/ Sports Drink
- Snacks –The day is long, have a small healthy snack between classes (i.e. fruit, nuts, granola, etc.)
- Lunch/Dinner – You will have one hour for lunch and 30 minutes for dinner. So I suggest you pack your meals and snacks. There is **NO** stove available for use although, there will be a microwave and refrigerator available.



General Rules and Regulations

Chewing gum, eating and drinking are not allowed in the studios or dressing rooms. There will be a designated area for this. The use of illegal drugs or alcohol is strictly forbidden and is grounds for immediate dismissal. Our facility is a smoke free environment.

Messages can be left for students by calling (937) 223-6156 from 9:00am to 7:00 Sunday – Saturday. Except for emergencies, all messages for students will be delivered during break periods.

Dress Code:

BALLET – solid colored leotards with tan/ pink/ black tights and ballet slippers. Men– black tights, dark colored leotards, tight white/black tanks and black ballet shoes

JAZZ – Dark colored leotards with black tights or tight black jazz pants. Dark colored unitards can also be worn. Jazz shoes or dance paws are okay however, jazz sneakers may not be worn.

MODERN – Dark colored leotard with black footless tights or leggings. Dark colored unitards can also be worn. Class should be taken in bare feet.

HIP-HOP- Tennis shoes

AFRICAN- solid colored leotard, lappa and tights/leggings. Men- solid colored tanks and pants

DCDC WILL NOT BE RESPONSIBLE FOR LOST OR STOLEN PROPERTY.

Valuables should not be left unattended in the dressing rooms, but should be taken to class.

Attendance



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Students are expected to attend every class and to arrive on time. Progress in class is dependent upon regular and consistent participation. Absences are considered excused only for medical or serious personal reasons, and must be phoned in before class begins in the morning. Students entering class late for any reason may be asked to observe class.

MEDICAL RELEASE FORM

Student:

Last Name _____ First Name _____

Middle Initial _____ Age _____

Home Address

City _____ State _____ Zip Code _____

Student Cell Phone _____

Parent or Guardian Name _____

Home Phone _____



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Work Phone _____

Cell Phone _____

Emergency Contact Name _____

(Other than Parent Above)

Relationship _____

Home Phone _____

Work Phone _____

Cell Phone _____

Physician's Name _____

Physician's Phone _____



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Student General Health Information

Do you have any allergies to food or medication? _____ Yes _____ No

Please list _____

Are you presently taking any medication? _____ Yes _____ No

Please list _____

Do you have any significant health problems? _____ Yes _____ No

Please list _____

Do you have asthma? _____ Yes _____ No

If yes, please initial below:

I agree to bring all medication, including inhalers, and keep them with me at all times.

Student Initials _____

Parent's Initials for Students Under 18 _____



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If student is under 18, please check off the following medications they may take and initial below:

Medication Yes _____ No _____
Tylenol Yes _____ No _____
Excedrin Yes _____ No _____
Pepsid Yes _____ No _____
Immodium Yes _____ No _____

Parent's Initials _____

Please list any additional information that is relevant (i.e. special circumstances, past medical events, injuries, etc.)

I acknowledge that all the information on this sheet is true to the best of my knowledge.

Student Signature _____ Date _____

Parent Signature _____ Date _____

(for Students Under 18)

REMEMBER: Students must bring their Insurance Cards in case of an Emergency!



ADULT PARTICIPANT

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

PLEASE READ THE FOLLOWING CAREFULLY. This is a legally binding obligation to release certain parties from all known or unknown obligations. This instrument affects important legal rights. If you have any questions, have them answered BEFORE agreeing to these terms.

I, _____, am submitting this Waiver of Liability, Assumption of Risk, and Indemnity Agreement (this "Agreement") with the understanding that it will be required and relied upon by The Dayton Contemporary Dance Guild, Incorporated dba Dayton Contemporary Dance Company ("DCDC") in connection with allowing me to voluntarily participate in the 2015 Summer Intensive offered by DCDC (the "Activity").

Waiver and Release: In partial consideration for being permitted to participate in the Activity, I, on behalf of myself, my spouse, my heirs, personal representatives, executors and administrators, and any other person(s) who may take by or through me (my "Representatives"), hereby release, waive, forever discharge and agree to hold harmless DCDC and its directors, trustees, members, managers, officers, employees, affiliates, agents, and representatives (the "Released Parties"), from and against any liability for any losses, liabilities, claims, damages, and/or expenses of any nature whatsoever which I or my Representatives may now or hereafter be entitled to assert, including but not limited to any death, injury, property damage, or other harm or loss of any nature, and any and all claims based on publicity rights, privacy rights, personality rights, "moral rights," or defamation, whether directly or indirectly caused by, contributed to, arising out of, or otherwise related to participation in the Activity (the "Released Claims").

Assumption of Risk: Participation in the activities at DCDC involves certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary, but the risks range from minor injuries to major injuries or possible death. I agree these risks exist and are associated with participation in activities at DCDC. I hereby knowingly and voluntarily assume such risks, regardless of any instruction provided by any of the Released Parties.

Indemnification and Hold Harmless: I also agree to defend, indemnify, and hold the Released Parties harmless from any and all claims, actions, suits, proceedings, damages, liabilities, costs, and expenses, including, but not limited to, attorneys' fees and other costs of defense, that arise out of or are connected with my participation in the Activity and to reimburse the Released Parties for any amounts that they pay or charges they incur relating to the same.

Recordings: I hereby irrevocably grant to DCDC and its licensees, affiliates, parents, and subsidiaries, and those acting with its authority, the unrestricted, absolute, perpetual, worldwide right and license to: (a) use my name, photograph, likeness, voice, biographical and personal background information, statements, and, without limitation, any notes, photograph, film, or



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video or audio tape that may be taken of me or of such materials (all of the foregoing, collectively, the “Recordings”); (b) to use and distribute any Recordings for any purpose and in any medium; and (c) modify the Recordings for any such use; without further compensation, consideration, or notice or permission by me or any third party.

Medical Care; Prohibited Uses; Participation; Governing Law: I understand that my emergency contact will be notified as soon as possible if I am taken to the hospital and/or any medical care facility. I understand that I am financially responsible for all medical costs including without limitation diagnostic procedures, laboratory tests, X-rays, and medication arising directly or indirectly from my participation in the Activity. This Release contains the entire agreement between the parties. This Agreement shall be subject to and governed by the laws of the State of Ohio.

I REPRESENT, WARRANT, AND CERTIFY THAT (A) I AM 18 YEARS OF AGE OR OLDER, (B) I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS AND UNDERSTAND THAT IT INCLUDES AN ASSUMPTION OF RISKS AND RELEASE OF LIABILITY, AND (C) I HAVE FULL LAWFUL POWER AND AUTHORITY TO ENTER INTO THIS AGREEMENT. I ACKNOWLEDGE THAT I AM AGREEING TO THESE TERMS FREELY AND VOLUNTARILY, AND I INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Name of Participant

Signature of Participant

Date



CHILD PARTICIPANT (If you are under the age of 18 please fill out this form)

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

PLEASE READ THE FOLLOWING CAREFULLY. This is a legally binding obligation to release certain parties from all known or unknown obligations. This instrument affects important legal rights. If you have any questions, have them answered BEFORE agreeing to these terms.

I am submitting this Waiver of Liability, Assumption of Risk, and Indemnity Agreement (this “Agreement”) with the understanding that it will be required and relied upon by The Dayton Contemporary Dance Guild, Incorporated dba Dayton Contemporary Dance Company (“DCDC”) in connection with allowing my minor child or my legal ward identified below (“My Child”) to voluntarily participate in the 2015 Summer Intensive offered by DCDC (the “Activity”).

Waiver and Release: In partial consideration for My Child being permitted to participate in the Activity, I, on behalf of myself, My Child, and our respective heirs, personal representatives, executors and administrators, and any other person(s) who may take by or through us (our “Representatives”), hereby release, waive, forever discharge and agree to hold harmless DCDC and its directors, trustees, members, managers, officers, employees, affiliates, agents, and representatives (the “Released Parties”), from and against any liability for My Child’s losses, liabilities, claims, damages, and/or expenses of any nature whatsoever which I, My Child or our Representatives may now or hereafter be entitled to assert, including but not limited to any death, injury, property damage, or other harm or loss of any nature, and any and all claims based on publicity rights, privacy rights, personality rights, “moral rights,” or defamation, whether directly or indirectly caused by, contributed to, arising out of, or otherwise related to My Child’s participation in the Activity (the “Released Claims”).

Assumption of Risk: Participation in the Activity involves certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary, but the risks range from minor injuries to major injuries or possible death. I agree these risks exist and are associated with My Child’s participation in the Activity. I, for myself and on behalf of My Child, hereby knowingly and voluntarily assume such risks, regardless of any instruction provided by any of the Released Parties.

Indemnification and Hold Harmless: I also agree to defend, indemnify, and hold the Released Parties harmless from any and all claims, actions, suits, proceedings, damages, liabilities, costs, and expenses, including, but not limited to, attorneys’ fees and other costs of defense, that arise



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out of or are connected with My Child's participation in the Activity and to reimburse the Released Parties for any amounts that they pay or charges they incur relating to the same.

Recordings: I hereby irrevocably grant to DCDC and its licensees, affiliates, parents, and subsidiaries, and those acting with its authority, the unrestricted, absolute, perpetual, worldwide right and license to: (a) use My Child's name, photograph, likeness, voice, biographical and personal background information, statements, and, without limitation, any notes, photograph, film, or video or audio tape that may be taken of My Child or of such materials (all of the foregoing, collectively, the "Recordings"); (b) to use and distribute any Recordings for any purpose and in any medium; and (c) modify the Recordings for any such use; without further compensation, consideration, or notice or permission by me, My Child, or any third party.

Medical Care; Entire Agreement; Governing Law: I understand that My Child's emergency contact will be notified as soon as possible if My Child is taken to the hospital and/or any medical care facility. I understand that I am financially responsible for all medical costs including, but not limited to, diagnostic procedures, laboratory tests, X-rays, and medication arising directly or indirectly from My Child's participation in the Activity. This Release contains the entire agreement between the parties. This Agreement shall be subject to and governed by the laws of the State of Ohio.

I, FOR MYSELF AND ON BEHALF OF MY CHILD, REPRESENT, WARRANT, AND CERTIFY THAT (A) I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT MY CHILD AND I ARE GIVING UP SUBSTANTIAL RIGHTS AND UNDERSTAND THAT IT INCLUDES AN ASSUMPTION OF RISKS AND RELEASE OF LIABILITY, AND (B) I HAVE FULL LAWFUL POWER AND AUTHORITY TO ENTER INTO THIS AGREEMENT. I ACKNOWLEDGE THAT I AM AGREEING TO THESE TERMS FREELY AND VOLUNTARILY, AND I INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW FOR MYSELF AND ON BEHALF OF MY CHILD.

This is to certify that I, as parent or legal guardian with legal responsibility for My Child, consent and agree on My Child's behalf to the terms of this Agreement.

Name of Parent, Guardian, or Temporary Guardian (Please Print)

Signature of Parent, Guardian, or Temporary Guardian

Date _____

Name of Minor Participant (Please Print)

Date _____



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Arrival / Departure information

(please print)

Last Name _____ First Name _____

Middle Initial _____ Age _____

Cell Phone _____

Home Address _____

City _____ State _____ Zip Code _____

Please fill out the following information to the best of your knowledge:

Student Arrival Date _____

Arrival Time _____

Student: Departure Date _____

Departure Time _____

Will you be travelling alone? Yes No

If not, then with who? _____



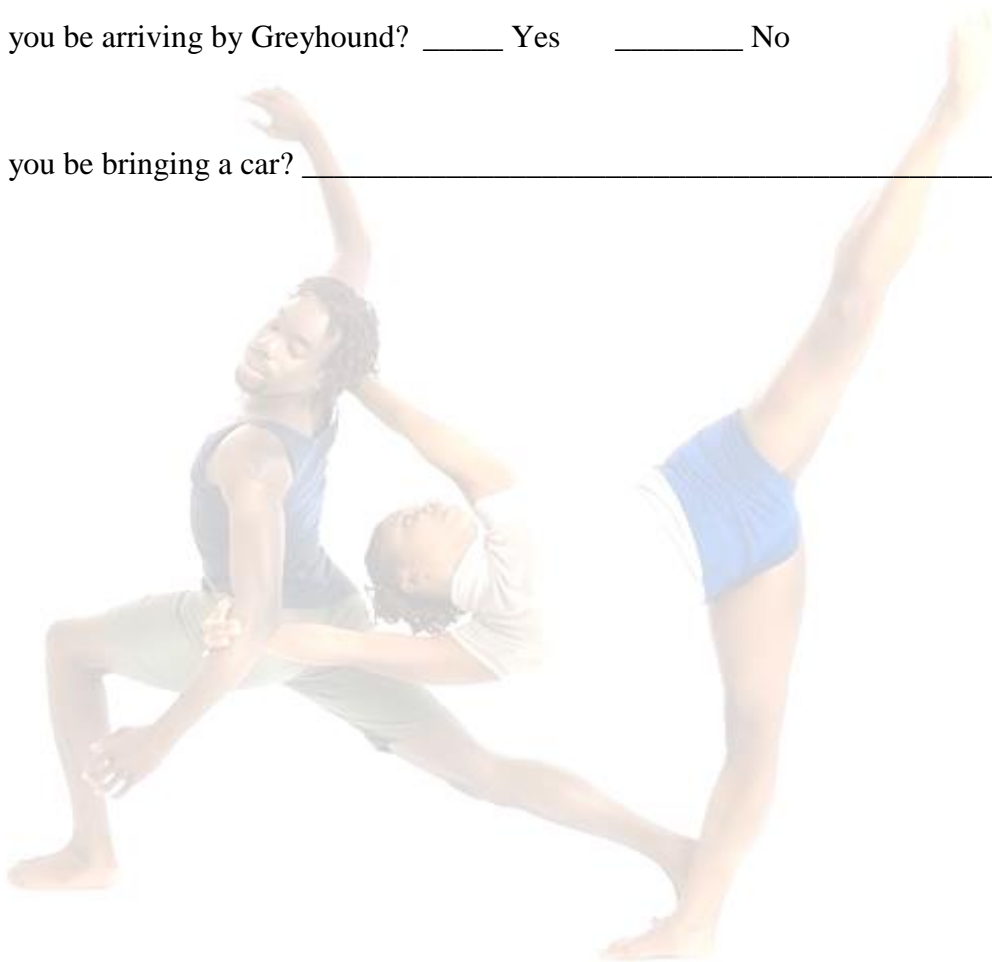
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Will you be arriving by plane? _____ Yes _____ No

If so, what airline? _____

Will you be arriving by Greyhound? _____ Yes _____ No

Will you be bringing a car? _____





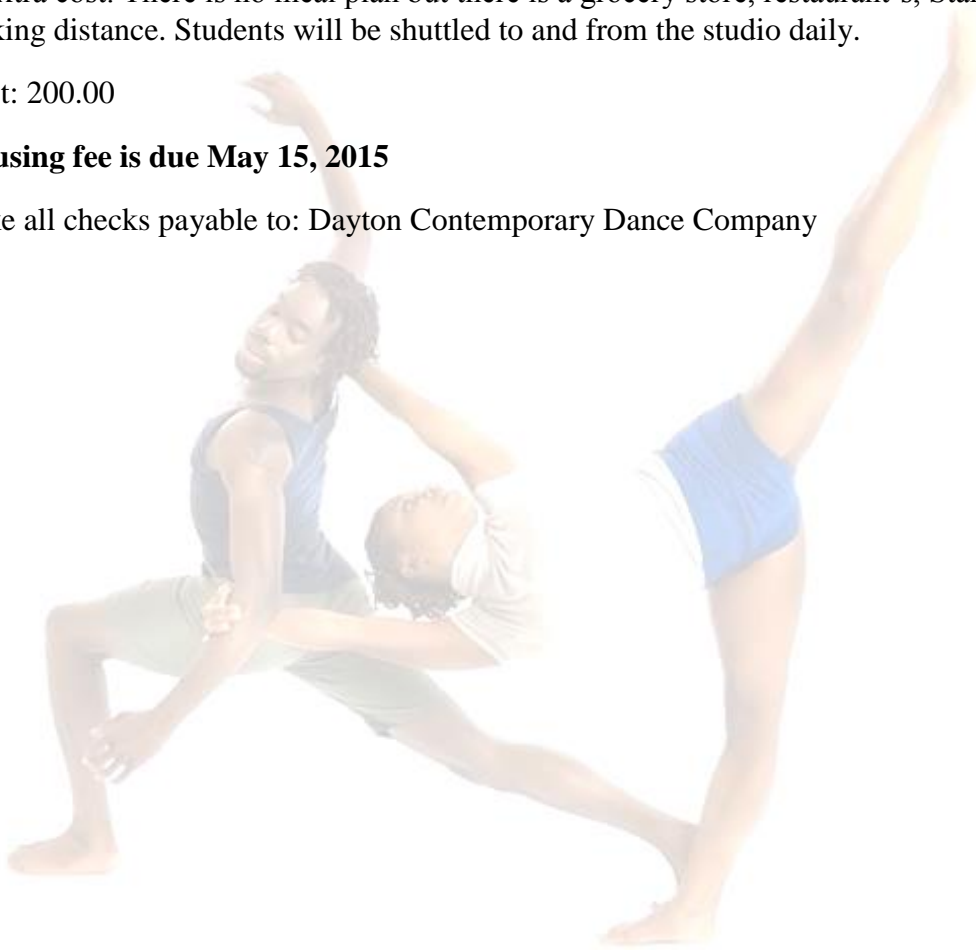
Housing

Housing is available at the Wright State University dorms. Each room has a refrigerator and a microwave. Linens are provided but please feel free to bring your own. Wifi is also available at no extra cost. There is no meal plan but there is a grocery store, restaurant's, Starbucks etc. in walking distance. Students will be shuttled to and from the studio daily.

Cost: 200.00

Housing fee is due May 15, 2015

Make all checks payable to: Dayton Contemporary Dance Company





DIRECTIONS TO DCDC STUDIOS

Dayton Contemporary Dance Company Studios are located at:

840 Germantown, Dayton, OH 45402.

If you are traveling NORTH on I-75

Merge onto I-75 N via the ramp to Dayton - 7.8 mi

Take exit 52B for US-35 W toward Eaton - 0.7 mi

Follow signs for OH-4/Germantown St - 0.1 mi

Turn right at OH-4 N/Germantown St Continue to follow Germantown St

Destination will be on the right - 0.3 mi

Arrive at: 840 Germantown St Dayton, OH 45417

If you are traveling SOUTH on I-75

Merge onto I-75 S toward Dayton - 10.3 mi

Take exit 52B for US-35 W/US-35 E toward Eaton/Xenia - 0.1 mi

Keep right at the fork to continue toward OH-4 N/Germantown St - 0.3 mi

Keep right at the fork, follow signs for OH-4/Germantown St - 0.1 mi

Turn right at OH-4 N/Germantown St Continue to follow Germantown St

Destination will be on the right - 0.3 mi

Arrive at: 840 Germantown St Dayton



CONTACT INFORMATION

Dayton Contemporary Dance Company

Mailing / studio Address:

840 Germantown

Dayton, OH 45402

Business Phone:

937.228.3232

Emergency Contact:

Marlayna Locklear

Emergency Contact phone number:

414.232.0827

Email:

Marlaynalocklear@yahoo.com

