

# One Day Dance Blast 2018/19

## Information Sheet

*NOTE: Please read this document carefully and retain for your reference.*

### MINIMUM REQUIREMENTS

The One Day Dance Blast Course is open to all ability levels.

### PRICE

£40

### COURSE PAYMENT

Payment for the course can be made either via cheque, online, or by card over the phone. Cheques should be made payable to 'Central School of Ballet'. Please print the participant's name on the back of the cheque. Alternatively, you can pay online through our website <http://www.centralschoolofballet.co.uk/coursesonlinepayment.php>

You can also call the Widening Participation & Access Department during office hours (9.30am-5.00pm) and pay by credit/debit card over the telephone.

**Please note that an administrative charge of £5 will be levied against any cheques that are returned by the bank.**

In addition, please note that when paying online you will receive a notification of payment from WorldPay. This does not indicate that a place has been awarded on the course. Only a notification of acceptance from the Widening Participation and Access Department by email, upon receipt of your application form, confirms an allocated place on the course. If you have not received an email within 7 days of sending your application, then please contact the Widening Participation and Access department on 0207 837 6332.

Completed application forms can be emailed to [participation@csbschool.co.uk](mailto:participation@csbschool.co.uk) or sent to:

Widening Participation & Access Department, Central School of Ballet, 10 Herbal Hill, Clerkenwell Road, London, EC1R 5EG.

### REFUND POLICY

Should you at any time decide to withdraw your application or not attend on the day of the course, the course fee is unfortunately non-refundable.

For further details regarding payments, please see the payment section of this application form.

## **DRESS**

Please come with a ballet uniform if you already have it, although this is not a requirement, and leggings, shorts and T-shirt or something suitable to move in will suffice. Children must either wear ballet shoes or bare feet. Please also bring something warm to wear in-between classes.

## **TIMETABLE**

As a guideline, your first class will begin at around 10.00am and the day will end at around 3:30pm, please check the specific timetable which will be sent to you ahead of your course date.

If your child is to be collected at the end of the day by another parent or friend, other than yourself, please inform a member of the Widening Participation team at the front desk. Due to limited space in the building, there will be no waiting room space available for parents during the day.

We will provide your timetable and any additional relevant information in advance of the course.

## **LUNCH / BREAK TIMES**

We will provide squash during break times, but please come prepared with lunch and plenty of snacks to eat during the breaks. We ask that snacks are nut free. Central School of Ballet do not provide lunch nor snacks on any courses.

## **PERMISSION TO LEAVE THE BUILDING / TRAVEL HOME ALONE**

Children are supervised throughout the day. We are aware that some of the older children may wish to leave the building at lunchtime to visit the local shops or travel home alone. We only allow children to leave the building alone if a parent / carer has completed and signed a '*Permission to Leave the Building Form*'. If you are happy for your child to leave the building alone then please contact a member of the Widening Participation team for the relevant form.

## **OUR LOCATION**

10 Herbal Hill

Farringdon

London

EC1R 5EG

Central School of Ballet is located near Farringdon tube and Overground station. Chancery Lane tube is also within a ten-minute walk.

# One Day Dance Blast 2018/19 Application Form

**Please indicate the course and date you are applying for:** \_\_\_\_\_

## Applicant's Details

Surname:		First Names:	
Address:			
Postcode:			
Date of Birth:		Age:	
Current School Year:		Male / Female	
<b>Parent / Carer Contact Details</b> Contact name in case of emergency:  Telephone no. (incl. code): Email Address (for all correspondence about the course):			

## Academic School

Name of School:
Address:
Postcode:

### Dance or Theatre School

Name and addresses of dance schools, teachers and date attended starting with your current teacher (please continue on an additional sheet if necessary).

Name of Dance Teacher	Address of Dance School	Dates Attended	Hours per week

### Training to Date

Have you studied:	YES	NO	Most recent examination taken. Please state examining board, level, date taken and result
Classical Ballet			
Contemporary Dance			
Modern/Jazz			
Musical Theatre			
Acting			
Singing			
Capoeira			
Any other dance style (please state)			

### Additional Information

	YES	NO	If yes, please specify
Have you previously attended any Central School of Ballet courses?			

### Injuries & Medical Conditions

Please specify any ongoing medical conditions, allergies and recent injuries and relevant treatment.

  
  
  
  
  
  
  
  
  
  

I understand that the information I provide on injuries and medical conditions will be processed by appropriate individuals only in accordance with access protocols (i.e. on a 'need to know' basis). I can withdraw my consent at any time by emailing [participation@csbschool.co.uk](mailto:participation@csbschool.co.uk)

### Course Payment

How did you pay for this One Day Dance Blast?

Cheque Enclosed <input type="checkbox"/>	Credit Card <input type="checkbox"/> Date.....	Online <input type="checkbox"/> WorldPay Transaction ID.....
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## Photography Permission

Central School of Ballet may take photographs and/or film footage in classes which will be used at the discretion of Central School of Ballet, the Conservatoire of Dance and Drama and partner organisations on social media and future marketing campaigns. To comply with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018, we need your permission before any images of your child (aged under 18) are taken. Please note names of children will not be printed alongside photographs.

**YES**, I give / **NO**, I do not give (*please delete accordingly*) permission for my son/daughter to be photographed and/or filmed during classes, and for the resulting images to be used by Central School of Ballet and the Conservatoire of Dance and Drama.

We will ask for your consent on an annual basis throughout the duration of your child's time at Central School of Ballet. You can withdraw your consent at any time by writing to [participation@csbschool.co.uk](mailto:participation@csbschool.co.uk)

## Mailing List

If you would like to be contacted about future Widening Participation opportunities and events at Central School of Ballet, please complete your details below. Please note that you must be aged 18 or over to receive emails from Central School of Ballet.

Yes, I would like to receive further details about Widening Participation opportunities at Central School of Ballet.

(If you do not wish to receive emails regarding other opportunities, please leave this box blank. Please note that you will therefore only receive emails about term dates, fees and classes for which you attend)

Please place a ✓ in the box:

Name (PLEASE PRINT): \_\_\_\_\_

Email: \_\_\_\_\_

## Declaration and Data Protection

This is to certify that to the best of my knowledge the information provided in this document is accurate at the time of writing. I accept that any amendment to the information provided after acceptance and acknowledgement of this application could result in the loss of a place. I have also read and understand the Payment and Refund Policy detailed on page 11 of the application form.

I understand that any information I provide will be retained by Central School of Ballet and that I can withdraw my consent at any time by emailing [participation@csbschool.co.uk](mailto:participation@csbschool.co.uk)

To view Central School of Ballet's Privacy Policy please refer to the 'About Central' section on the website, [www.centralschoolofballet.co.uk](http://www.centralschoolofballet.co.uk)

Signed (Parent/Guardian):

Print Name:

Date:

# Equality and Diversity Information Form

Central School of Ballet is committed to offering programmes of activity to talented students who may not otherwise afford the opportunity or have the support structure in place at home. The questions below help us determine how we can best develop our courses to benefit as many young people as possible and offer them an insight into higher education study. Central School of Ballet welcomes applications/ participants from all sections of the community regardless of ethnicity, gender, religion or disability.

The information you give in this section is used for statistical and monitoring processes only

Age of Participant: \_\_\_\_\_

Gender: Male  Female

How old were you when you started Ballet? \_\_\_\_\_

Did either of your parents attend Higher Education? Yes  No

**Ethnicity** – Please tick the box(es) which best describe your ethnic or cultural background:

50 Arab	<input type="checkbox"/>	42 Mixed – White and Black African	<input type="checkbox"/>
33 Asian or Asian British – Bangladeshi	<input type="checkbox"/>	41 Mixed – White and Black Caribbean	<input type="checkbox"/>
31 Asian or Asian British – Indian	<input type="checkbox"/>	39 Other Asian Background	<input type="checkbox"/>
32 Asian or Asian British – Pakistani	<input type="checkbox"/>	29 Other Black Background	<input type="checkbox"/>
22 Black or Black British – African	<input type="checkbox"/>	80 Other Ethnic Background	<input type="checkbox"/>
21 Black or Black British – Caribbean	<input type="checkbox"/>	49 Other Mixed Background	<input type="checkbox"/>
34 Chinese	<input type="checkbox"/>	98 I do not wish to give this information	<input type="checkbox"/>
15 Gypsy or Traveller	<input type="checkbox"/>	10 White	<input type="checkbox"/>
43 Mixed – White and Asian	<input type="checkbox"/>		

**Disability** – Which of the following statements about disability is most appropriate to you? Please tick the appropriate box(es).

00 No known disability	<input type="checkbox"/>	57 Deaf or a serious hearing impairment	<input type="checkbox"/>
51 A specific learning difficulty e.g. dyslexia	<input type="checkbox"/>	58 Blind or a serious visual impairment uncorrected by glasses	<input type="checkbox"/>
53 Social/ communication impairment, e.g. Autistic Spectrum	<input type="checkbox"/>	08 Two or more impairments and/ or disabling medical conditions	<input type="checkbox"/>
54 Long-standing illness or health condition, e.g. epilepsy	<input type="checkbox"/>	96 A disability, impairment or medical condition not listed above	<input type="checkbox"/>
55 Mental health condition	<input type="checkbox"/>	00 I do not wish to give this information	<input type="checkbox"/>
56 Physical impairment or mobility issues (e.g. difficulty using arms, using a wheelchair or crutches)	<input type="checkbox"/>		

**Household Income** – Please indicate the income bracket which your household falls into:

Less than £25,000  Less than £43,000  Less than £60,000  Over £60,000