

# CLASS PLACEMENT GUIDELINES

Below is a list of the placement guidelines used at Gustafson Dance.  
Class placement is entirely at the discretion of the Director, Allison Gustafson, and  
Assistant Director, Nicole Comella

*For Creative Dance and Pre-Ballet class placement is based on age:*

|                |  |
|----------------|--|
| Creative Dance | 2 years old by May 31, 2011                    |
| Pre-Ballet 1   | 3 years old by September, 2011                 |
| Pre-Ballet 2A  | 4 years old by September, 2011                 |
| Pre-Ballet 2B  | 5 years old by September, 2011 or Kindergarten |

For those above the Pre-Ballet level, class placement is based on several factors, including, but not limited to age, grade in school, ability, years of study, class attendance, maturity, experience, and attitude. The Director and/or Assistant Director can guide you for placement in these levels. Below, please find the general age range and number of days per week required for each level:

- Primary 1, 6 years old by Sept., 2011 or 1<sup>st</sup> grade....1 class per week
- Primary 2, 7 years old by Sept., 2011 or 2<sup>nd</sup> grade....1 class per week
- Level 1: 8-10 years old by Sept., 2011 or 3<sup>rd</sup> grade..2 classes per week
- Level 2A: 9-11 years old by Sept. 2011 or 4<sup>th</sup> grade....2 classes per week
- Level 2B: 9-12 years old by Sept. 2011 or 4<sup>th</sup> grade....2 classes per week
- Level 3A: 10-12 years old by Sept. 2011.....3 classes per week
- Level 3B: 11-13 years old by Sept. 2011.....3 classes per week
- Level 3C: 12-14 years old by Sept. 2011.....3 classes + jazz per week
- Level 4A: 11-13 years old by Sept. 2011.....4 classes +jazz per week
- Level 4B: 12-15 years old by Sept. 2011.....5 classes +jazz per week
- Level 5: 13-17 years old by Sept. 2011.....6 classes
- Level 6: 15-19 years old by Sept. 2011....6 classes
- Primary Jazz 1&2, 6 years by Sept., 2011 or 1<sup>st</sup> grade
- Jazz 1-6: Jazz Level 1-6 Matches the Ballet level of the student. For those students wishing to register solely in Jazz, call the office for placement.

For Children's Tap and Combo classes, placement is based on age, as noted in the schedule.

# Gustafson Dance Registration Form 2011-'12

Today's Date \_\_\_\_\_

Check #/ amount \_\_\_\_\_

**Please return with the non-refundable \$40 registration fee per student due upon registration or the beginning of each school year.**

Student's Name \_\_\_\_\_ Sex \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Grade (as of Fall/10) \_\_\_\_\_

Class Level, Day(s) and Time(s): \_\_\_\_\_

Class Placement (Please call 563-3262 if you are unsure of level and time.)

Name of Responsible Party: \_\_\_\_\_ Home #: \_\_\_\_\_

Address: \_\_\_\_\_ Work or cell #: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Student's Home Phone: \_\_\_\_\_

Email Address (Required): \_\_\_\_\_

Secondary Email Address (optional): \_\_\_\_\_

Additional person to contact in the event of an emergency: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

## MEDICAL INFORMATION:

Known allergies: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Medication Currently Used: \_\_\_\_\_

When a student suffers a serious injury or illness while at Gustafson Dance, first aid will be rendered and an immediate and continuing effort will be made to contact the emergency contact of that student.

**For parents:** If I cannot be reached by telephone in the event of an emergency involving

\_\_\_\_\_ (Name of Child), please call Dr. \_\_\_\_\_

(Physician's Name or Other) or take my child to any available medical service. I am aware, however, that in most situations the physician and/ or medical facility will not treat a minor child without parent permission.

## RELEASE OF LIABILITY

I agree that I/we will not hold Gustafson Dance/State Street Ballet and its employees liable for any injury or illness that might occur while \_\_\_\_\_ (Student's Name) is a student of Gustafson Dance absent any negligent, reckless, and/or intentional actions on the part of Gustafson Dance/State Street Ballet, its agents, employees and/or representatives.

\_\_\_\_\_  
(Signature of Parent or Guardian) (Date)