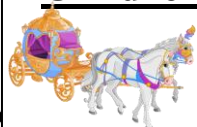




## Children's Summer Ballet Camp at Brae Crest! July 2023



The Brae Crest School of Ballet, official school of The State Ballet of Rhode Island, and Director, Herci Marsden, are pleased to offer **two** 5-Day **Summer Ballet Camps** for children ages 5 to 12, with at least 1 year of ballet training. This uniquely designed camp is an opportunity for the student to enjoy and experience the many aspects of classical ballet which includes character dancing, stage make-up, choreography, sewing and costume design, injury prevention, nutrition, art class, French class, Pilates, as well as theater class. Give your child the opportunity to study with happy and highly regarded professionals in a beautiful country setting.

**WEEK #1 CAMP** July 10-July 14 Theme: **Cinderella**

**WEEK #2 CAMP** July 17-July 21 Theme: **The Magic of ENCANTO**



### FACULTY & STAFF

Ana Marsden Fox, Lori Broess, Shana Fox Marceau, Paula Marandola, Julie Marcotte  
Rebecca DeVivo & Ashley Pabón

Counselors: Dancers from The State Ballet of RI

### REGISTRATION

Children ages 5-12 yrs old (as of July 1, 2023) with at least one year of ballet training.  
A non-refundable deposit of \$50.00 for one week or \$80 for both (2) weeks

**Due by April 1, 2023 \*Camp enrollment limited! Balance due by June 1, 2023\***

**TUITION One Week: \$245.00 + \$50 deposit = \$295.00 total**  
**Two Weeks: \$430.00 + \$80 deposit = \$510.00 total**

*Cash Payment, or please make checks payable to Herci Marsden*

For more information, (401)334-2560 [Info@stateballet.com](mailto:Info@stateballet.com) [www.stateballet.com](http://www.stateballet.com)

### Additional Class Descriptions & Materials Needed

- **Arrive each morning** ready to dance: **dressed in black yoga shorts & short sleeve shirt. Thin socks. No tights. Hair in a bun & out of face.**
- **Bring** your pink ballet shoes in backpack; short sleeve smock (art), beach towel, yoga mat (optional). **Please have your camper's name on all belongings.**
- **Lunch:** Bring a water bottle, lunch, beach towel and snack each day
- **Character Class:** Ethnic folk dancing – introduced in choreography thematically
- **Stage Makeup Class:** How and why to apply stage makeup – Bring: Mirror, cold cream or makeup wipes, **dark** blue/brown eye shadow, brown eye pencil, amber rose blush, dark brown or black liquid eye liner, fuchsia lipstick, black mascara, hair elastics and face towel. Campers do not share makeup.

\*\*\*Schedule Subject to change (weather, etc.)\*\*\*

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
9:00am	arrival	arrival	arrival	arrival	arrival
	Ballet & choreography	Ballet & choreography	Ballet & choreography	Stage Rehearsal	Makeup Application & Costumes
	Art	Theatre/Sewing	Art	Sewing/ Costumes	<b>Family Performance</b>
	Art	Nutrition	Art	Ethnic Folk Dance	Lunch
	Lunch	Lunch	Lunch	Lunch/ Show & Tell	Project Wrap Up
	Makeup	French/Sewing	Makeup	French/Pilates	Art/Show & tell
2:30pm	Dismissal	Dismissal	Dismissal	Dismissal	Dismissal



Send Registration Form to: **Herci Marsden or Brae Crest School of Ballet**  
PO BOX 155, Lincoln, RI 02865-0155

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### REGISTRATION FORM (please print)

**Name:** \_\_\_\_\_ **Age** as of July 1<sup>st</sup>, 2023: \_\_\_\_\_  
**Current Brae Crest Ballet Class day & time:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City & State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Telephone # & Name for Emergency:** \_\_\_\_\_  
**Birth date:** \_\_\_\_\_ **Week 1** \_\_\_\_\_ **Week 2** \_\_\_\_\_  
**Allergies:** \_\_\_\_\_

*I being the parent/guardian of the above-named child give my approval to partake with Brae Crest School of Ballet. I understand and acknowledge that a risk of injury exists in Summer Ballet Camp. I assume these risks and incidental hazards. I hereby in agreement with the Rhode Island General Law 7-6-9 release and agree to hold harmless the Brae Crest School of Ballet, it's directors, servant, employees, and volunteers with said organization.  
I also hereby grant permission to Brae Crest School of Ballet supervisors to obtain emergency medical care from any licensed medical personnel for the named herein at such time as either parent or guardian cannot be contacted.*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_

**Check here:** 1 Week ☐ \$50.00 Deposit plus ☐ \$245.00 = \$295.00 total  
2 Weeks ☐ \$80.00 Deposit plus ☐ \$430.00 plus = \$510.00