DANCE TIME STUDIO

DANCE CAMPS 2019

 DANCE TIME CUP or SHOE BAG **with registration! :)**

 OFFERED ONLY 1 WEEK! CLASSES FILL FAST!

SIGN UP SOON TO GUARANTEE YOUR SPOT!!

|  |  |  |
| --- | --- | --- |
| **Time &****Dates:** | **Session # 1\*****floor A - downstairs** | **Session # 1\*****Floor B -upstairs** |
| **July 8-10th (M,T,W)** | **July 8 -10th (M,T,W)** |
| **10:00-****11:00 am** | **Mini Ballet** **ages 3-6** | **All Star Hip Hop****ages 7-10** |
| **11:30-****12:30 pm** | **Beginning****Clogging****ages 7+** | **Mini Hip Hop** **ages 4-6** |
| **CLOGGING CAMP:****This will be a fast paced 1 day LOW/MIDDLE INTERMEDIATE clogging camp for existing cloggers. NO BEGINNERS!****Thursday, July 11th 9 am -1 pm Pack a lunch :)**  |

 **\*\*Each class is $45.00 per dancer per class**

\*Each class limited to 10 dancers. \*Classes must have a min. of 5 dancers or they may be combined or cancelled.

PICK UP/ DROP OFF YOUR REGISTRATION FORMS

 **from the Columbia Physical Therapy office** OR **download them from our website**

 **\*\*\*\*** REGISTRATIONS DUE BY JULY 5TH! \*\*\*\*

[www.dancetimeothello.com](http://www.dancetimeothello.com) Questions? Becky 509-989-1846



**DANCE TIME! SUMMER REGISTRATION 2019**

**Student Information:** (List all children who plan to attend classes…More than 3 kids? Let me know!)

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_ Class choice : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Session #\_\_\_\_\_\_\_\_\_\_

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_ Class choice :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Session#\_\_\_\_\_\_\_\_\_\_

**Parent Information:**  **YOU MUST FILL IN BOLD AREA**  **Do you Facebook?** Yes No

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Texting?** Yes No

**Mailing Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred contact Phone #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SUMMER DANCE CAMP FEES PER CHILD, PER CAMP: $45.00**

Please read carefully and be aware that in signing up and participating in the above program, you will be waiving and releasing all claims for injuries arising out of this program that you or the above participant might sustain:

***I have read the Dance Time! Policies and Procedures information sheet and agree to its rules and regulations.***

*I, also, do hereby fully release and discharge Dance Time!, its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I (or dependents under 18 years of age) may have or which my accrue to me (or dependents) on account of my (their) participation in the above Dance Time! sponsored activities.*

*I further agree to indemnify and hold harmless and defend Dance Time!, its officers, agents, servants, and employees from any and all claims resulting from injuries, damages, and losses sustained by me (or dependents under 18 years of age) and arising out of, connected with, or in any way associated with these activities sponsored by Dance Time!*

*\*\*Dance Time will from time to time post pictures on their website. If you* ***DO NOT*** *want your child’s pictures posted it is your responsibility to speak with me! Otherwise your signature gives permission to use said pictures.*

Signature (parent’s signature if participant(s) is/are under 18)

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**COMPLETED REGISTRATIONS AND FEES can be dropped off at the Columbia Physical Therapy front desk or MAIL to: Becky Jones, 2354 W. Covey Rd. Othello, WA 99344**

**OFFICE USE ONLY ~~** Summer Fee paid Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_ for $\_\_\_\_\_\_\_\_\_\_\_\_\_ **OR** Cash \_$\_\_\_\_\_\_\_\_\_\_\_\_ Received by\_\_\_\_\_\_\_\_\_\_