

**Isabelle's Dance Time**  
**Summer Dance Classes 2018"**  
**"3 Weeks of Summer Dance Classes July 9 - July 27"**

PM	Monday	Tuesday	Wednesday	Thursday	Friday
5:00-6:00	<b>Beg/Inter Ballet</b>	<b>Beg/Inter Jazz</b>	<b>Musical Theater</b>	<b>Beg/Inter Contemporary</b>	<b>Street</b>
6:00-7:30	<b>Inter/Adv Ballet</b>	<b>Inter/Adv Jazz</b>	<b>Stretch &amp; Strengthening</b>	<b>Inter/Adv Contemporary</b>	<b>Choreographer's Workshop (6:00-8:00)</b>
7:30-9:00	<b>Pointe (by teacher's permission)</b>	<b>D.T.T.C.</b>	<b>Contact Improvisation</b>	<b>D.T.T.C.</b>	

**Summer Dance Classes Descriptions:**

**Beginner & Intermediate Classes:** Ages 8-adult. No prior experience needed. Open to all levels.

**Ballet:** Styles you will learn; Romantic, Classical, Neo Classical and Contemporary Ballet.

**Pointe:** By teacher's permission only. Requirement you must be enrolled in the Inter/Adv Ballet

**Contemporary -** Styles you will learn; Graham, Hawkins, Horton and Humphrey Techniques

**Jazz -** Styles you will learn; Traditional, Jazz Ethnic, Modern and Funk.

**Street -** Age 10 and up: Hip Hop, Breakdancing and popping and locking.

**Stretch & Strengthening Techniques:** Pilates, Yoga and Feldenkrais. Open to all levels.

**Musical Theatre -** Learn various styles of choreography from different musicals.

**Contact Improvisation:** Experience dancing with fellow students while making contact.

**DTTC:** "Dance Time Theater Company" class is by audition only. Require 3 additional technical classes per week.

**Choreographer's Workshop:** This workshop is a comprehensive study that will aid all who are interested in choreographing and give students tools for success, whether you have experience or if you are even curious about choreographing. **THERE IS SOMETHING FOR EVERYONE!!!!**

**What a Deal!**  
**Unlimited Classes:**  
**\$150.00 individual or**  
**\$200.00 per session**  
**per family.**

**2018 Summer Dance Tuition Rate**

# of Classes	Tuition	# of Classes	Tuition
1	\$20	7	\$101
2	\$35	8	\$113
3	\$50	9	\$123
4	\$65	10	\$133
5	\$77	11	\$143
6	\$89	12	\$150

**Isabelle's Dance Time Summer Dance Classes  
2018 Registration Form (one form per student)**

Student Name:	Date of Birth:	Age:
Address:	City:	State: Zip Code:
Telephone Number #1:		Telephone #2:
Name of Parent or Guardian:		E-Mail Address:
Please <b>Circle</b> the classes you wish to enroll and the dates, then total your hours for each class You can register and pay on-line at <a href="http://www.isabellesdancetime.com">www.isabellesdancetime.com</a>		

Monday	Tuesday	Wednesday	Thursday	Friday
<b>Beg/Inter Ballet</b> July 09  July 16  July 23	<b>Beg/Inter Jazz</b> July 10  July 17  July 24	<b>Musical Theater</b> July 11  July 18  July 25	<b>Beg/Inter Contemporary</b> July 12  July 19  July 26	<b>Street</b> July 13  July 20  July 27
<b>Inter/Adv Ballet</b> July 09  July 16  July 23	<b>Inter/Adv Jazz</b> July 10  July 17  July 24	<b>Stretch</b> July 11  July 18  July 25	<b>Inter/Adv Contemporary</b> July 12  July 19  July 26	<b>Choreographer's Workshop</b> July 13  July 20  July 27
<b>Pointe</b> July 09  July 16  July 23	<b>DTTC</b> July 10  July 17  July 24	<b>Contact Improvisation</b> July 11  July 18  July 25	<b>DTTC</b> July 12  July 19  July 26	

**Total Number of Classes:** \_\_\_\_\_ **Amount Due:** \_\_\_\_\_

**Method of Payment:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**I understand and agree to have my child or self follow policies regarding dress requirement, attendance and tuition.**

**X** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guardian or Student Signature**

**\*Fill out Medical info and Liability Waiver on the other side.\***

**ISABELLE'S DANCE TIME MEDICAL/LIABILITY WAIVER 2018**

STUDENT NAME: \_\_\_\_\_

PARENT'S/GUARDIAN'S NAME: \_\_\_\_\_

PERSON TO CONTACT IN CASE PARENT OR GUARDIAN IS UNAVAILABLE:

NAME \_\_\_\_\_ RELATION \_\_\_\_\_ PHONE \_\_\_\_\_

MEDICAL/LEGAL

CONCERNS \_\_\_\_\_

**MEDICAL/LIABILITY WAIVER**

I grant permission to the staff of the dance school to take first aid or emergency measures as judged necessary for the care and protection of my child while under the supervision of the school. In case of medical emergency, I understand that my child will be transported to an appropriate medical facility by the local emergency unit for treatment if the emergency unit deems it necessary. I understand that in some medical situations the staff will need to contact the emergency resource before the child's parent, physician, and or other person acting on the parent's behalf. I also understand and agree that the child's parents or legal guardians shall be responsible for any expenses incurred. As the parent/legal guardian of \_\_\_\_\_ . I agree to hold harmless from any and all liability the school, its officers, employees both in their professional capacity and personally for all injury or illness resulting from or in any way connected with his/her participation in the classes, activities or special events at the school. I understand that it is the school's policy that while under the supervision of the school no child is allowed to leave the building without a parent/legal guardian or the written permission of a parent/legal guardian and that the parent/legal guardian assumes full responsibility for the actions and behavior of the child. Parents/legal guardians give their permission to the school to use photos and or video of their child without payment in connection with school publications, advertising, TV and news coverage.

Registration is for Summer Classes 2018

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

Isabelle's Dance Time

4120 S. Sullivan Rd.

Veradale, WA. 99037

Studio # 509-927-0972

E-mail address: [isabelle@isabellesdancetime.com](mailto:isabelle@isabellesdancetime.com)

Web address: [www.isabellesdancetime.com](http://www.isabellesdancetime.com)