



Petipa

Summer Registration Form

1808 Woodmoor Dr., Monument, CO 80132
719.232.5313/ jeri@atimetodancecolorado.com

Dancer's Name: _____ D.O.B. _____ Age _____
 Parent/Guardian: _____ Cell# _____ Home# _____
 Dancer Email: _____ Parent Email: _____
 Address: _____
 Contact in case of emergency (other than parent) name and #: _____
 Does dancer have any medical restrictions/allergies: yes/no _____
 Previous Dance Training (type/duration): _____

June 4th-8th
Monday
 Ballet 10:00-11:30
Tuesday
 Ballet 12:00-2:00
Thursday
 Ballet 4:30-6:00
O Ballet \$65.00/week

June 12th-14th
Tuesday
 Ballet 9:00-10:30
 Video Lunch 10:30-12:00
 Workshop 12:00-1:00
Wednesday
 Ballet 1:15-2:45
 Workshop 3:30-4:30
Thursday
 Workshop 11:00-12:00
 Ballet 12:30-2:00
O Ballet \$75.00
O Ballet/Workshop \$96.00/week

June 18th-22nd
Tuesday
 Workshop 11:45-12:45
 Ballet 1:15-2:45
Wednesday
 Workshop 11:15-12:15
 Ballet 12:45-2:15
Friday
 Workshop 11:00-12:00
 Ballet 12:30-2:00
O Ballet \$75.00
O Ballet/Workshop \$96.00/week

June 26th-28th
Tuesday
 Ballet 9:00-10:30
 Video Lunch 10:30-12:00
 Workshop 12:00-1:00
Wednesday
 Ballet 1:15-2:45
 Workshop 3:30-4:30
Thursday
 Workshop 11:00-12:00
 Ballet 12:30-2:00
O Ballet \$75.00
O Ballet/Workshop \$96.00/week

July 2nd - 6th
Monday
 Ballet 9:00-10:30
 Hip-Hop 3:00-4:00
 Tap I 4:00-5:00
Tuesday
 Ballet 9:00-10:30
 Lyrical 3:00-4:00
Friday
 Ballet 12:00-2:00
O Ballet \$65.00/week
O GGG \$100.00/week

July 9th - 13th
Monday
 Ballet 9:30-11:00
Tuesday
 Ballet 1:00-2:30
Friday
 Ballet 2:30-4:30
O Ballet \$65.00/week

July 16th - 20th
Monday
 Ballet 9:30-11:00
Wednesday
 Ballet 10:00-12:00
Thursday
 9:30-11:00
O Ballet \$65.00/week

Theater Camp
(ages 7-9) or (10+)
July 16th - 20st
Time: Mon-Thurs 2:00pm-4:30pm
Fri 4:30pm-8:00pm
What: Dance, Act, Sing



Perform: Friday, July 20th @ 7:30pm
Tuition: \$150.00 or \$195.00

Totals from Jun 4-Jul
 Jun 4-8 \$ _____
 Jun 12-14 \$ _____
 Jun 18-22 \$ _____
 Jun 26-28 \$ _____
 Jun Hip-Hop/Tap \$ _____
 Jul 2-6 \$ _____
 Or God Given Gifts **\$100.00**
 Jul 9-12 \$ _____
 Jul 16-20 \$ _____
 Jul Hip-Hop/Tap \$ _____
 Theatre Camp \$ _____
Total for Jun \$ _____
Total for Jul \$ _____

Form of payment: _____

June Hip-hop/Tap Classes
Monday, Jun 4th
 O Hip-hop 3:00-4:00
 O Tap I 4:00-5:00
Monday, Jun 18th
 O Hip-hop 3:00-4:00
 O Tap I 4:00-5:00
Monday, Jun 25th
 O Hip-hop 3:00-4:00
 O Tap I 4:00-5:00
\$14.00 per class x's _____

July Hip-hop/Tap Classes
Monday, Jul 2nd
 O Hip-hop 3:00-4:00
 O Tap I 4:00-5:00
Monday, Jul 9th
 O Hip-hop 3:00-4:00
 O Tap I 4:00-5:00
Monday, Jul 16th
 O Hip-hop 3:00-4:00
 O Tap I 4:00-5:00
\$14.00 per class x's _____

Release of Liability
 As the legal parent or guardian, I release and hold harmless A Time To Dance, its owners and operators, from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of A Time To Dance, its owners and operators, or en route to or from any of said premises.

Medical Emergency
 The undersigned gives permission to A Time To Dance, its owners and operators, to seek medical treatment for the participant in the event they are not able to reach a parent or guardian. I hereby declare any physical/mental problems, restrictions, or condition and/or declare the participant to be in good physical and mental health. I request that our doctor/physician _____ be called at _____ and that my child be transported to _____ hospital. I've read all of the above and the Studio Policies and agree:
 _____ Date ____/____/____
 (Signature of parent or legal guardian if student is under age 18, or signature of student if age 18 or older)