

Summer Dance ♥ ♥ For 6 to 9 Year Olds!

Child 1, 2, 3 Ballet/Tap/Jazz Students



♥ Also including:
♥ Terrific Tumblers!
♥ Hip Hop Kidz!

July 9 - August 17, 2018

Terrific Tumblers	Cartwheel and roll your way to fun! Joy prevails as your tiny tumbler enjoys the trampoline, balance beam, hula hoops, and more!
Child 2&3 Ballet, Tap, Jazz Lyrical, Acro	In this dance buffet, your child will love to sample new styles. Lyrical, Acro, Jazz, Tap, and Ballet will tickle their toes.
Child 1 Ballet, Tap, Jazz	NEW Ballet/Tap/Jazz combo! Your child will jump for joy at the chance to learn some cool jazz moves as they twirl through ballet and tap their feet to the beat.
Hip Hop Kidz	These cool kids will be jammin' to the beat! Bouncing, stomping, and shaking to upbeat music – what could be more fun?

Select and mark your classes with an "X".

*We pro-rate tuition in the summer if you are away on vacation.
Tuition listed to the right is for the full 6 weeks summer session.*

	Tue.	5:45-6:30	Terrific Tumblers	Ages 3½-6	\$72
	Wed.	6:15-7:15	Child 2&3 Bal/Tap/Jazz/Lyr/Acro	Ages 7-9	\$90
	Thr.	5:30-6:15	Child 1 Bal/Tap/Jazz	Ages 6-7	\$90
	Thr.	6:15-7:00	Hip Hop Kidz	Ages 5-8	\$72

Paul Klocke Studio of Dance, Aston PA (610) 494-4610
Email: studio@paulklockdance.com Website: www.paulklockdance.com

Contact Information

- ♥ Child's Name: _____
- ♥ Age: _____ Birthdate: _____
- ♥ Health Concerns: _____
- ♥ Guardian's Name: _____
- ♥ Address: _____
- ♥ City/State/Zip: _____
- ♥ Phone: _____
- ♥ Email: _____

Photo Release: I accept that the studio takes pictures and videos of the students in class and in performance. These pictures may be used in studio displays and promotional materials.

Medical Release: I the Parent/Guardian of the student registrant agree that the registrant and I consent to the registrant's participation in the PKSD physical programs and activities ("PROGRAMS"). Recognizing the possibility of physical injury associated with the PROGRAMS, and in consideration for the PKSD accepting the registrant for its PROGRAMS, I hereby release, discharge, indemnify, and hold harmless the PKSD, its affiliated organizations, and their employees, teachers, and associated personnel from and against any and all claims by or on behalf of the registrant as a result of the registrant's participation in the PROGRAMS. In my absence, I also request PKSD, through its staff, to obtain emergency medical care in the event that such care is necessary or appropriate in the opinion of the staff for the benefit of my child due to accident or illness. I promise to pay any treatment costs directly to the hospital, physician, or laboratory providing such care upon presentation of the bill to me.

Parent Signature _____ Date _____

Tuition will be pro-rated for classes missed during your summer vacation. Write (on the chart below) the dates you will be gone; the number of weeks you will attend; and the full tuition for the class (see other side). Take the full tuition, divide it by the total number of weeks the class is in session (6 weeks), and multiply it by the actual number of weeks you will be attending. This is your tuition. Please call us if you have any difficulty calculating this.

Class	Dates Missing	# of Weeks Taking	Full Tuition (see other side)	Prorated Tuition
			Subtotal	
DISCOUNT – If your subtotal is over \$200 deduct 5% of the total. (5% = total times 0.05)			Discount	
Call (610) 494-4610 for payment. Mastercard/Visa Accepted Checks Payable to: Paul Klocke Dance			Total Amount	