

## Princess Dance Camp 2017

- Session 1: Monday Thursday, June 26<sup>th</sup> 29<sup>th</sup>
  - Camp Time: 10:00-12:00 for Pretty Princesses (3-4 yr. olds), 12:00-2:00 for Dancing Queens (5-7 year olds)
- Session 2: Monday Thursday, August 21<sup>st</sup> 24<sup>th</sup>
  - Camp Time: 10:00am-12:00pm for ages 3-5
- \* Cost: \$85 per student/per session (4 classes).
  - Must pay for full session; no discounts can be given for missed classes
- Ballet, Jazz, Creative Movement, Tumbling, Crafts and much more!
- This year's Princesses will be Sofia the First, Elena of Avalor, Rapunzel, and Moana
- A usual camp day:
  - An hour dance class, with instruction in Jazz, Ballet, Creative Movement, Tumbling and other activities to aid in the development of rhythm, movement and coordination; everything focused on 1 princess each day.
  - Dancers will then have a quick snack (bring your own, due to allergy concerns) before an arts & crafts project, games and other dance related activities.

This camp will fill up quickly! Please reserve your child's spot in class by filling out the registration form below with payment, and placing in tuition drop box, or mail in to Hoffman School of Dance at 577 Fillmore Avenue, East Aurora, NY 14052. Class size will be limited.





## Princess Dance Camp

## Summer 2017 Registration

Address		Phone			
	Street			Home	Emergency
			E-Mail		
	City	Zip Code			
Current Age	ge Date of Birth		Mother's No	ıme	
Please list any aller	gies (food or othe	rwise) that the faculty sho	ould be aware of:		
Please Cir	<u>cle</u> : Sess	ion 1 ( Ages 3 - 4	or Ages 5 - 7	) or	Session 2 (Ages 3-5)

- I the undersigned agree to follow the policies and procedures set forth by Hoffman School of Dance Inc. as they have been created in the best interest of the students.
- I accept the responsibility of reading and following all information received in the summer information.
- I and my child are aware that there is a potential risk associated with participating in a dance class. I understand and assume all risks associated with dance class participation, including but not limited to falls or contact with other persons. I also affirm that I now have and will continue to provide proper hospitalization, health and accident coverage that I consider adequate for both my child's and my own protection.
- I give permission for emergency medical treatment of my child in the event that a parent cannot first be contacted.
- I approve the use of my child's photograph in studio publications, advertising and website. I understand that names will not be listed.

PARENT/GUARDIAN SIGNATURE	DATE	/	/
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