

# Tie-Dye Hip Hop Camp

Tuesday July 8th – Friday July 11th **Ages 8-12, Beginner**: 5:00-5:45pm

**Ages 8-12, Intermediate**: 6:00-6:45

**Ages 12-14, Beginner:** 7:00-7:45 \*Please bring a t-shirt to tie dye\*

## Cowgirl/boy Tap Camp

Monday July 21<sup>th</sup> – Thursday July 24<sup>th</sup> **Ages 5-7, Beginner**: 6:00-6:45pm

**Ages 6-7, Intermediate**: 7:00-7:45pm

## **Princess Ballet Camp**

Monday July 14th - Thursday July 17th

**Ages 3-4**: 4:00-4:45pm

**Ages 3-4**: 5:00-5:45pm

**Ages 5-7:** 6:00-6:45pm

**Ages 5-7:** 7:00-7:45pm

# Glitz & Glam Jazz Camp

Monday August 4th -Thursday August 7th

**Ages 6-8, Beginner**: 6:00-6:45pm

Ages 6-8, Intermediate: 7:00-7:45pm



### For more information:

Visit: www.downtowndance.org

Phone:(570) 768-9379

Email: downtowndancepa@gmail.com Suite 201, 434 Market Street Lewisburg, PA 17837

For registration please see the back of this paper  $\rightarrow$ 

### **Summer Dance Camp Registration Form**

Dancer's Name:	Age:	Birth date:	
Street Address:			
City, State, Zip:			
Email:			
Parent/Guardian's Name:		Cell:	
Telephone (Home):			
Do you have any medical problem(s) that we should be aware of? Yes No			
Do you have any allergies? Yes No If yes (to medical/allergies), please explain:			

### **Summer Dance Camps**

(Please circle which you are attending)

• **Hip Hop Camp**: 5:00 6:00 7:00

• **Ballet Camp**: 4:00 5:00 6:00 7:00

• **Tap Camp**: 6:00 7:00

• **Jazz Camp**: 6:00 7:00

Cost to enroll in a camp session is \$45. Second child fee is \$22. Boys are welcome in all camps. Please mail this form with payment to: Suite 201, 434 Market Street, Lewisburg PA, 17837 OR you may drop the registration form and payment in our drop box (on the first floor of our building).

Payment Method (circle one): Cash / Check TOTAL: \_\_\_\_\_

### **Emergency Contact Name, Relation:**

#### Contact's Phone:

I hereby release Downtown Dance, employees/independent contractors from all liability for personal injury, illness, or property damage occurring on or off the studio's premises. I authorize Downtown Dance to seek medical treatment at the nearest medical facility and they may call paramedics and discharge me/my student to an ambulance if I am not able to authorize it in case of a medical emergency. I certify that my student is in good health and capable of participating in physical activities. I hereby give permission to Downtown Dance to take and use photographs for promotional uses for the studio. I understand that payment is not refundable.

Signature Date

(Parent/Guardian, if minor)

<sup>\*</sup>For additional copies of this form, print off of www.downtowndance.org