



SUMMER DANCE CAMPS

Fun in the Sun Jazz Camp

Monday June 17th – Thursday June 20th

This camp will take place outside in Hufnagle Park

Ages 6-8, Beginner: 5:30-6:15pm
Ages 8-10, Intermediate: 6:30-7:15

Teeny Bopper Tap Camp

Monday July 22nd – Thursday July 25th

Ages 5-7, Beginner: 5:00-5:45pm
Ages 7-9, Intermediate: 6:00-6:45
Ages 8-10, Beginner: 7:00-7:45

Stars & Stripes Jazz Camp

Monday June 24th – Thursday June 27th

Ages 6-8, Beginner: 6:00-6:45pm
Ages 8-10, Intermediate: 7:00-7:45

Co-ed Hip Hop Camp

Monday July 29th – Thursday August 1st

Ages 8-10, Beginner: 6:00-6:45pm
Ages 8-12, Intermediate: 7:00-7:45

Princess Ballet Camp

Tuesday July 16th – Friday July 19th

Ages 3-4, Beginner: 4:00-4:45pm
Ages 3-4, Beginner: 5:00-5:45
Ages 5-7, Beginner: 6:00-6:45

All camps are themed and include basic dance instruction in the specified styles. Cost to enroll in a camp session is \$40. Second child fee is \$20. Boys are welcome in all camps.

For registration please see the reverse side of this paper

Email: downtowndancepa@gmail.com

Visit: www.downtowndance.org

Phone: (570) 768-9379

Suite 201, 434 Market Street
Lewisburg, PA 17837



Summer Dance Camp Registration Form

Dancer's Name:

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:

If registering a child, please provide:

Age: **Birth date:** Camp #1_____

Grade: **School:** Camp #2_____

Camp #3_____

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 have read Downtown Dance's General Information and Studio Policies as outlined. 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

(Parent/Guardian, if minor)

Date

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.