



Dance & Fitness
Preschool-12th Grade
Virtual Classes – 4 Weeks
JULY (begins 7/6)

danceworks.us 914.714.2131
info@danceworks.us



MONDAYS

11:30am-12:00pm Preschool Creative Ballet

4-4:30pm K-1 Tap

4:30-5pm Grades 2-5 Tap

TUESDAYS

4:30-5:20pm K-1 Hip Hop

5:25-6:25pm Pre-Teen & Teen Hip Hop / Jazz

6:30-7:30pm Pre-Teen & Teen Modern Dance

WEDNESDAYS

3:45-4:15pm K-1 Disney Ballet I

4:30-5:15pm – Grades 2-5 Ballet II

5:20-6:20pm – Grades 6-12 Ballet III

THURSDAYS

3:30-4:30pm Pre-Teen & Teen Broadway Jazz

TO REGISTER

Complete Registration form and return to info@danceworks.us.
Non-refundable payment of \$100 per student for each 4-week class via
Venmo, Zelle or PayPal info@danceworks.us

Once fully registered, you will receive Zoom class details.



Virtual and Live Class Registration Form

Venmo, Zelle or PayPal info@danceworks.us

Student's Name: _____ Date of Birth: _____ Age: _____ Grade: _____

Home Street Address: _____ City: _____ State: _____ Zip: _____

Mother's Name: _____ Cell Phone: _____ E-mail: _____

Father's Name: _____ Cell Phone: _____ E-Mail: _____

Authorized Pick Up Contact Name: _____ Cell Phone: _____ Relationship: _____

Emergency Contact Name: _____ Cell Phone: _____ Relationship: _____

Physician's Name: _____ Physician's Number: _____

Class #1 Day _____ Time _____ Description _____

Class #2 Day _____ Time _____ Description _____

Class #2 Day _____ Time _____ Description _____

Were you referred by an existing student? If yes, please provide name: _____

****Please list any health-related problems, allergies, medications or any other special considerations on this form ****

Policies: If student is injured, she/he should come to class to observe/learn. If student misses class due to fever/illness, he/she may take a make-up class. Schedules may change due to weather, other emergencies or participation. Non-refundable payment must be made in full at registration and form completed, signed and dated. Adults who register for ad hoc classes must provide 24-hour notice of any cancellations or changes.

Waiver of Liability: I understand that injuries are inherent with any physical activity. In the event that an injury occurs to me, my child or to a family member, I agree not to hold Dance Works, the class instructor or the Recreation Department's liable for any and all claims for bodily injury and property damage arising from participation in any Dance Works classes and activities. Dance Works, the class instructor or the Recreation Department's will not be held responsible for any health problems or for any accident resulting from failure to inform Director and instructor(s) of any conditions affecting student's health, either on this application or during class.

Authorization of Treatment: I consent to the participation of me and/or my child in Dance Works classes and certify to the best of my knowledge, I and/or my child is physically capable of participating in online classes and will not pose any risk to his/her health and safety, or the safety of others. In the event all reasonable efforts are made to contact me, and my child's emergency contact is unsuccessful, I give consent to arrange for or administer any medical treatment deemed necessary for my child by a licensed physician, and the transfer of my child to any medical facility reasonably accessible.

Photo/Video Release: I hereby consent to and authorize the use and reproduction of my or my child's image in print, video or electronic format taken in class or during virtual classes, performances and photo shoots without compensation. All images and videos are owned by Dance Works.

I have read, understood and hereby consent to the Policies, Waiver of Liability, Authorization of Treatment and Photo/Video Release above.

Signature (parent/legal guardian for children): _____ Date: _____