

STUDIO PHILOSOPHY

Our Studio is dedicated to professional instruction of the developing dancer with an emphasis on Ballet technique and Modern interpretative dance. Training focus is on the development and achievement of each student while encouraging self-confidence, self-discipline, creativity and performance. Students of all levels from preschoolers to adults enjoy the physical & creative benefits of working with our encouraging & dedicated staff.

CLASS DESCRIPTION

- Preschool:** Hour Combination class Ballet/Voice/ Jazz or Tap
Ballet: Classical Ballet technique w/emphasis on terminology. Barre & center work
Pointe: Must be recommended by teacher & at least Int. Ballet level
Jazz: Broadway & Modern Jazz styles
Tap: Broadway & Rhythm Tap
Lyrical: Combination of Jazz & Ballet techniques to create interpretive dance
Modern: Abstract form of dance focusing on breathe, contraction & interpretation. Martha Graham style.
Hip Hop : Street style dancing as seen in Music Videos.
Teen Classes: Ages 11yr.+ with various levels expected.
Acting: Basic Acting techniques& Theatre movement for 10 yrs.+

SUMMER 2010 SCHEDULE

Time	Tuesday	Wednesday	Thursday
3:30 – 4:30 pm			
4:30 – 5:30 pm	. Hip Hop 2/3 (JE)	Int. /Adv Lyrical (CZF) Preschool Ballet/Voice/ Jazz (JS)	Int./Adv. Tap (CZF) Acting (KL)
5:30 – 6:30 pm	Hip Hop 1 (JE)	Int. /Adv Jazz (CZF) Beg. 1 & 2 Jazz (JS)	Modern 2/3 (CZF) Adult Jazz & Lyrical (KG)
6:30 – 7:30 pm	Ballet 1& 2 (TM)	Beg./B. Int. Tap(CZF) Teen Lyrical (JS)	Preschool Ballet/ Voice Tap (CZF) Modern 1 (JM)
7:30 - 8:30 pm	B Int.Ballet (TM)	Teen Jazz (CZF) BInt.Jazz (JS)	Beg 2/B. Int. Lyrical (CZF) Int. /Adv. Ballet (TM)
8:30 – 9:30 pm			Pointe (TM)

Teachers: Charlee Zamudio-Fidler (CZF), Jean Sowers (JS), Tiziana Myers (TM), Kim Grove (KG), Janay Elliott (JE) and Kaitlin Leroy (KL)
Advanced Student Teacher: Jessie Morgan (JM)

Summer 2010 Registration form

Name _____ Age _____ DOB _____
 Address: _____
 Phone: (Home) _____ (cell) _____
 Parents/Guardian _____

Place a check in your choices:

Number of Classes	2 Weeks	3 Weeks	4 Weeks
<input type="checkbox"/> 1 class per week	<input type="checkbox"/> \$35	<input type="checkbox"/> \$40	<input type="checkbox"/> \$45
<input type="checkbox"/> 2 classes per week	<input type="checkbox"/> \$ 50	<input type="checkbox"/> \$55	<input type="checkbox"/> \$ 60
<input type="checkbox"/> 3 classes per week	<input type="checkbox"/> \$ 65	<input type="checkbox"/> \$70	<input type="checkbox"/> \$ 75
<input type="checkbox"/> 4 or more classes	<input type="checkbox"/> \$ 75	<input type="checkbox"/> \$ 80	<input type="checkbox"/> \$ 85

Class	Day	Time	Circle Weeks
1.			A B C D
2.			A B C D
3.			A B C D
4.			A B C D
5.			A B C D
6.			A B C D
7.			A B C D
8.			A B C D

Week A : July 13th - 15th Week C: July 27th – 28th
 Week B: July 20th -22nd Week D: Aug 3rd – 5th
 Cost of classes _____
 Discounts ? _____ (ie. Gift certificate/ Scholarship Card)
 Total Cost _____ Ck # _____

I have read the Studio Brochure and I agree to participate in classes offered by York Area Repertoire of Dance. I represent that I have no physical disorders that would prevent me from participating in strenuous physical activity. I hereby waive and release York Area Repertoire of Dance and its staff from and against all claims, costs, liabilities, expenses or judgments including attorney fees and court costs arising out of my participation in the York Area Repertoire of Dance Programs.

Signed: _____ Date: _____
 (Parent/Guardian must sign if student is under 18 years of age)