

STUDIO 4 COMPANY SUMMER CLASSES

MUST PRE-REGISTER TO HOLD YOUR SPOT IN EACH CLASS

\$20 Registration Fee Due with this Form

Class tuition is \$10 per class. Once you Pre-Register for your classes, your Summer Tuition will be posted on your account. These classes ARE NOT Drop-In. You must sign up for each class you plan on attending. To help keep our costs down during summer months, please pay check or cash for your Summer Tuition if possible ☺

Tuesdays- Studio B	Wednesdays - Studio B
July 12, 19, 26	July 13, 20, 27
5:30-6:30pm~Pre-Pointe/Pointe 1 Ms. Aidan	5:30-6:30pm~Stretch/Jumps & Turns Glitz-Glam-Sparkle Ms. Madison/Ms. Aidan
6:30-7:30pm~Pointe 2/3 Ms. Aidan	6:30-7:30pm~Stretch/Jumps & Turns Studio C: Sensation - Ms Aidan Studio B: Sapphire & Extreme Ms. Madison
	7:30-8:30pm~Stretch/Jumps & Turns Emerald-Elite Ms. Madison/Ms. Aidan

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Fill out this form & turn in to the office with your \$20 Registration Fee

Student Name: _____

Please select Class and List Dates beside it. You will not know your child's level until after auditions, so all we need is the Dates listed beside the class that you are requesting. After auditions, you will receive an email to confirm the Summer Classes/ Dates & Times for your dancer.

<input type="checkbox"/>	Pointe'. Dates Requesting:
<input type="checkbox"/>	Stretch/ Jumps & Turns. Dates Requesting:

My child has permission to participate in Studio 4 the Arts, LLC Summer Classes. I waive the right to claim against Studio 4 the Arts, LLC staff and teachers in the event of accident, injury, or loss of personal items. By signing this document, I understand that any cost or injury resulting from participation at Studio 4 the Arts, LLC is my responsibility.

I understand and acknowledge that attending in-person classes may pose a heightened risk of exposure to COVID-19 and I waive/release any right to sue for any and all claims against Studio 4 the Arts, LLC, owner, teachers, staff and/or other students. I will abide by the safety guidelines set forth by Studio 4 the Arts, LLC to help prevent the spread of COVID-19. I will not allow my child to come to class if they show any signs or symptoms of COVID-19.

Parent Signature

Date