

Hip Hop



Hip Hop

STOMP

for the BOYS

Cheer

for the GIRLS

GIRLS and **BOYS** in grades K through 5th are invited to join our “**Exclusive**” Hip Hop Dance, Stomp and Cheerleading Class! Middle Schools, High Schools and Colleges have dance and cheer squads, so starting now is a huge advantage for your child. Students will learn basic dance skills, cheerleading fundamentals, and **TWO** Hip Hop routines set to music, all while meeting new friends and **HAVING FUN!** Our program encourages team building and also helps your child build positive self esteem early. ☺

The lessons are held under the direction the Center Stage Staff. Our teams have performed locally at the MAD ANTS games and we intend on continuing that FUN tradition! We are starting a new year of fun so **REGISTER NOW** before classes fill up. ☺

DAY: TUESDAYS

TIME: 3:00 – 3:45 p.m.

PLACE: ARLINGTON GYM

STARTING DATE: *October 3, 2017*

COST: \$9.00 per lesson – Payments for the entire month are due at the beginning of each month.
(ALL returned checks will be charged a \$25.00 NSF FEE)

RECITAL: There is an OPTIONAL year-end recital held in May for family and friends. Participating students should expect an extra cost of \$65.00 (covers the cost of uniform shirt, shorts, trophy, and other awards) - **due in January 2018.**

REGISTRATION FEE: To register, there is a one-time non-refundable fee of \$25.00.

Make checks payable to Center Stage Academy of Dance.

Please mail your form & check for \$25.00 by **Sept 30, 2017** to: Center Stage Academy of Dance
3416-1 N Anthony Blvd
Ft. Wayne, IN 46805

Visit us on the Web at: www.csdancersrock.com ****We also accept VISA/MASTERCARD***

If you have any questions call the office at 492-7516. Email: csdancersrock@yahoo.com

(Please Print and return bottom portion with your non-refundable \$25.00 registration fee and KEEP top half)
STUDENT'S NAME: _____ BIRTH DATE _____

AGE _____ GRADE _____ SCHOOL _____ DATE REGISTERED _____

PARENT NAME: _____ HOME PHONE # _____ CELL PHONE # _____

HOME ADDRESS: _____ CITY _____ ZIP CODE _____

EMERGENCY CONTACT: _____ EMERGENCY CONTACT PHONE # _____

(Friend or Family Member)

E-MAIL ADDRESS (Required): _____

(Parent Signature)