

DENVILLE DANCE ARTS CENTER

11 HEWETSON RD.

DENVILLE, NJ 07834 (973) 627-1440

www.denvilledance.com join us on Facebook

BEGIN MONDAY, SEPTEMBER 17th



Ballet*Lyrical*Jazz* Tap*Gymnastics*Hip Hop
Pre-School - Professional

Dance Masters * Dance Educators of America

Professional Faculty Certified to Teach Dance Classes

We have a dress code- be sure your dancer is dressed in our dress code requirements. When scheduling more than one class or student, please check for same recital schedule indicated by A or B *Requires approval. **Ballet Required. All pointe students must take two Ballet classes. Tiny Dancer Class Age as of September 1st, 2018. Classes may be subject to change or cancellation. ** You are guaranteed a place by registering early & NOT changing classes.

8/20/18

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY	
	4:00-4:45 Ballet/Tap/Jazz 4-7 yr A <i>Twinkle Star DANCE</i>			9:30-10:00 Ballet/Tap/Jazz 2-3 yr A Tiny Dancer <i>Twinkle Star DANCE</i>	10:00-10:45 Ballet/Tap/Jazz 3-5 yr A Tiny Dancer <i>Twinkle Star DANCE</i>		1:30-2:15 Ballet/Tap/Jazz 3-5 yr A Tiny Dancer <i>Twinkle Star DANCE</i>	4:00-4:45 Hip Hop 4 8-11 B <i>SHOWSTARS DANCE</i>		9:00-9:30 Ballet/Tap/Jazz 2 1/2 -3 yr B Tiny dancer <i>Twinkle Star DANCE</i>	
4:45-5:30 Hip Hop 3 6-9 yr A <i>SHOWSTARS DANCE</i>	4:45-5:30 Ballet 2 5-9 yr A <i>SHOWSTARS DANCE</i>			4:00-4:45 Company Tap 4	10:45-11:00 Intro to Acro \$15 a month add-on to Wed 10:00 class		2:15-2:30 Intro Acro 3-5 yr \$15.00 a month Add on Thurs 1:30	4:45-5:30 Jazz 4 8-11 yr B <i>SHOWSTARS DANCE</i>		9:30-9:45 Intro to Acro \$15 a month add-on Sat 9:00 and 9:45	
5:30-6:15 Jazz 8-12 yr A <i>SHOWSTARS DANCE</i>	5:30-6:15 Beg/Intermediate Acro 6-10 yr A <i>SHOWSTARS DANCE</i>		4:00-5:00 Company Ballet 2 ballet classes recommended	4:45-5:30 Company Lyrical	4:00-4:45 Jazz 7-11 yr B <i>SHOWSTARS DANCE</i>	4:00-4:45 Hip Hop & Flip Flop 5-8 yr No Recital 12 Weeks \$100	4:00-6:00 Company Rehearsal, Turns & Technique	5:30-6:15 Tap/Jazz 7-10 yr B <i>SHOWSTARS DANCE</i>		9:45-10:30 Ballet/Tap/Jazz 2 4-5 yr B Tiny dancer <i>Twinkle Star DANCE</i>	
6:15-7:00 Teen Tap 12 and over A	6:15-7:00 Lyrical 7-12 yr A <i>SHOWSTARS DANCE</i>		5:00-6:30 Company* Conditioning & Stretch	5:30-6:30 Company Jazz	5:30-6:15 Lyrical 7-11 yr B	4:45-5:30 Ballet/Tap/Tumble 3-5 yr B tiny dancer class <i>Twinkle Star DANCE</i>	6:00-9:00 Company Rehearsal, Turns & Technique			Ask about our <u>multiple class discount for a single dancer!!!</u>	
	7:00-7:45 Adult Tap 6 weeks \$50	6:15-7:00 Jazz / Hip Hop Fusion 10-14 A	6:30-7:30 Company Ballet 2 ballet classes required		6:30-7:15 Intermediate Acro 9-13 yr B Front Limber required	5:30-6:15 Ballet 6-10 yrs B <i>SHOWSTARS DANCE</i>		Registration fees are \$40.00 per student –max family \$55 and are non-refundable. Discounts are available for multiple classes. There are no refunds for missed classes, but make-up classes are available.			
			7:30-9:30 Company * Technique 5/6		7:15-8:15 Adv Acro 11 & up yr A/B back handspring <i>needed</i>	6:15-7:00 Tap/Jazz 6-9 yrs B <i>SHOWSTARS DANCE</i>	7:00-7:15 Intro to Lyrical For 6:15 class \$15.00 a month Add on Thurs 6:15	TUITION PAYMENT PLANS			
***Classes with insufficient enrollment are subject to cancellation						<ol style="list-style-type: none"> 1. One 45 minute class Term in Full \$590.00 \$75.00 payment due in September and the balance paid by October 15th. 2. One 45 minute class Plan 2: 3 payments of \$208.00 – due with first class of September, October & November. 3. Plan 3 one 45 minute class Extended Plan: 5 Payments of \$127.00 due the First class Sept, Oct, Nov, Dec, and January. We do not accept credit or debit cards. Plan 2 & 3 have a built in accounting fee. 					



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Student's Name _____ Age _____ Birthdate _____

Class(es) Requested _____ Referred by _____

Parents: Mother _____ Father _____

Address _____ Town _____ Zip _____

Phone _____ Work (Mother) _____ Work (Father) _____

Alternate Emergency Name _____ Phone _____

Medical Problems of which we should be aware _____

Major Medical Insurance _____ Hospitalization _____

Are you new to DDAC? ___ Please check if: 5th ___ 10th ___ 15th ___ or Senior Year ___ at DDAC Amount Enclosed \$ _____

e-mail address _____ Parent Signature _____ Date _____

Classes with insufficient enrollment are subject to change or cancellation.

I give DDAC permission to use any photos/videos for promotional and publicity purposes (with no names shown) unless I initial here _____.

I understand that I am required to notify the studio in writing once the term has begun if my child drops a class and that I will be billed and charged tuition and late fees until required written notice is received.

8/20/18

Check Payment Plan
YIF (\$75 deposit due Sept) _____
3 Installments _____
5 Installments _____

Registration *

*A PHYSICIAN'S permission slip must accompany this form if any registrant has medical problems that could be aggravated by the study of dance. Please consult a physician if you are unsure if a problem exists. We reserve the right to decline any registration. I understand that the registrant will participate in this activity at her/his own risk. I understand that this program is a physical activity, that various injuries may occur and that the Center assumes no responsibility for injury, and that a medical physical by a doctor is recommended. *Required by our insurer.*