

# DANCE *at* CAMPERDOWN

## CLASS DESCRIPTION:

Come dance with us for 1 hour a week as we explore different genres like: hip hop, African, and modern. Both boys and girls will learn warm-ups, technique, and choreography. The 10 week series will finish in a performance for family and friends to showcase their hard work. Students should wear comfortable clothing that they can move easily in (no dresses or skirts). No particular shoes are required as we will dance barefoot, although tennis shoes are suggested for hip-hop.

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CAMPERDOWN ACADEMY

AGES 1ST-6TH GRADES ON *MONDAYS* 3:30-4:30  
NOVEMBER 13-FEBRUARY 12TH (2ND, TRI-MESTER)  
NO CLASS: 11/20, 12/25, 01/01, 01/15

10 week session • PERFORMANCE • Registration  
+ performance = • Date & Time TBD • on BACK  
\$125 • •



Fill out the form below and place a check made out to **CDC**  
*in an envelope with your name and "DANCE" written on it* and turn into the  
**FRONT DESK at CAMPERDOWN or to MR. JIMMY**  
OR

Click ENROLL at CarolinaDanceCollaborative.com and log in or create an account, add a parent & student and find 'Camperdown' under Tab: 'Fall 2017 School Programs.' Pick the class and complete payment online.

Student's Name: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Alternative Emergency Contact Info: \_\_\_\_\_

Payment Information: (pick one)

Cash: \_\_\_\_\_ Check: # \_\_\_\_\_

CC #: \_\_\_\_\_ CC Exp. Date: \_\_\_\_/\_\_\_\_ CC CVS #: \_\_\_\_\_

Photo Release Form:

I authorize Carolina Dance Collaborative (CDC), its agents, employees, sponsors, or other authorized parties to include my minor child in photographs, videos, audio or other recordings for any lawful purpose; including, without limitation: education, public information, marketing, fundraising, or in connection with any release of information to the media. I hereby grant to CDC all rights to use and publish such photographs, videos, audios or other recordings. I understand that I have no right to compensation in connection with this consent.

Liability Release:

I understand that dance involves physical contact, that serious accidents occasionally occur, and that participants occasionally sustain personal injuries. Knowing the risks, I, on behalf of myself, my minor child, and any heirs or assigns thereof, hereby release and hold harmless CDC and its agents, employees, sponsors, or other authorized parties from any and all liability resulting in connection with my child's participation in the CDC programs. In addition, I acknowledge that CDC and its employees are not medical providers, and that their programming is presented for informational purposes only, and is not intended to substitute for professional medical advice. Lastly, I am aware that dance also requires physical contact in order to correct alignment, demonstrate proper placement, and help students succeed and do hereby give CDC and its agents permission to appropriately address the aforementioned situations.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_