



**SG Danceworkz and  
Fitness Studio, LLC**

1733 Service Drive, Winona, MN 55987  
507-474-6955

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Owner/Director: Sheena Gifford-Whitesitt

## Summer Classes 2018

**Creative Movement (2-4 year olds): Wednesday 5-5:45pm**

**Cost: \$35/session or \$60.00/2 sessions if paid by May 20, 2018**

Session 1: June 13<sup>th</sup>, 20<sup>th</sup>, 27<sup>th</sup>, and July 11<sup>th</sup> (No class July 4<sup>th</sup>)

Session 2: July 18<sup>th</sup>, 25<sup>th</sup>, August 1<sup>st</sup> and 8<sup>th</sup>

**Combo Level 1-3 (3-5 year olds): Mondays 5:00pm-6:00pm**

**Cost: \$45/session or \$80/2 sessions if paid by May 20, 2018**

Session 1: June 11<sup>th</sup>, 18<sup>th</sup>, 25<sup>th</sup>, and July 9<sup>th</sup> (No class July 2<sup>nd</sup>)

Session 2: July 16<sup>th</sup>, 23<sup>rd</sup>, 30<sup>th</sup>, and August 6<sup>th</sup>

**Combo 4/Junior Sampler (6-8 year olds): Wednesday 5:45pm-6:45pm**

**Cost: \$45/session or \$80.00/2 sessions if paid by May 20, 2018**

Session 1: June 13<sup>th</sup>, 20<sup>th</sup>, 27<sup>th</sup>, and July 11<sup>th</sup> (No class July 4<sup>th</sup>)

Session 2: July 18<sup>th</sup>, 25<sup>th</sup>, August 1<sup>st</sup> and 8<sup>th</sup>

**Beginning/Intermediate Level Sampler (9+ year olds): Mondays 7-8pm**

**Cost: \$45/session or \$80.00/2 sessions if paid by May 20, 2018**

Session 1: June 11<sup>th</sup>, 18<sup>th</sup>, 25<sup>th</sup>, and July 9<sup>th</sup> (No class July 2<sup>nd</sup>)

Session 2: July 16<sup>th</sup>, 23<sup>rd</sup>, 30<sup>th</sup>, and August 6<sup>th</sup>

# SG Danceworkz and Fitness Studio LLC

## Registration Form: Summer 2018

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

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Entering Fall 2018: \_\_\_\_\_

How did you hear about us (List dancer's name if referred from current dancer)?:

\_\_\_\_\_

### **Contact Information:**

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

Street City State Zip

Parent Primary Phone: ( ) \_\_\_\_\_ (home work cell)

Parent Secondary Phone: ( ) \_\_\_\_\_ (home work cell)

Parent Email Address: \_\_\_\_\_

Student Phone: ( ) \_\_\_\_\_ (home work cell)

Student Email Address: \_\_\_\_\_

### **Emergency Information:**

Emergency Contact: Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Known Allergies: \_\_\_\_\_

\_\_\_\_\_

Known Medical Conditions/Medications: \_\_\_\_\_

\_\_\_\_\_

Preferred Hospital/Medical Center: \_\_\_\_\_

## Parent/Guardian Release:

***Please read carefully and sign below.***

***Student will not be able to participate in class without Guardian's signature.***

- I have read and agree to abide by SG Danceworkz and Fitness Studio's LLC policies regarding, but not limited to: tuition, withdrawal notice, attendance, dance attire, late fees, costumes, etc.
- I understand that SG Danceworkz and Fitness Studio LLC is not responsible for any lost items, stolen items, or unclaimed merchandise.
- SG Danceworkz and Fitness Studio LLC reserves the right to use photos & video taken during class, performances, or other studio events.
- I understand that participation in a dance or fitness program involves risk and possible injury. I understand that SG Danceworkz and Fitness Studio LLC, its staff, and independent instructors will not be held responsible for injuries sustained in class, while performing or traveling to and from its facilities or events. I authorize SG Danceworkz and Fitness Studio LLC to secure any medical treatment my child might need. Preferred medical facility is listed on Registration Form, but I authorize SG Danceworkz and Fitness Studio LLC to send my child to the nearest facility as needed.
- I have listed all medication conditions, medications, allergies, and emergency contact information that SG Danceworkz and Fitness Studio LLC, its staff, and independent instructors should be made aware of on the front.

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

Relation to Student: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

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

# Summer Class Registration

Please enroll this student in the following class(es):

## Creative Movement (2-4 year olds):

Cost: \$35/session or \$60.00/2 sessions if paid by May 20, 2018

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_

Cost: \_\_\_\_\_

## Combo Level 1-3 (3-5 year olds):

Cost: \$45/session or \$80.00/2 sessions if paid by May 20, 2018

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_

Cost: \_\_\_\_\_

## Junior Sampler (6-8 year olds):

Cost: \$45/session or \$80.00/2 sessions if paid by May 20, 2018

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_

Cost: \_\_\_\_\_

## Beginning/Intermediate Level Sampler (9+ year olds):

Cost: \$45/session or \$80.00/2 sessions if paid by May 20, 2018

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_

Cost: \_\_\_\_\_

***In order to receive the two session discount, full amount must be received prior to May 20, 2018.***

For Office Use Only:

Amount Paid: \_\_\_\_\_ Payment Type: \_\_\_\_\_ Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Registration Complete: \_\_\_\_\_ Confirmation Email or Letter sent: \_\_\_\_\_