

Pottstown Dance Theatre

Summer Schedule

Six-Week Session July 10 to August 17, 2023

Monday		Tuesday		Wednesday		Thursday	
I	II	I	II	I	II	I	II
6:00-6:30pm Conditioning /Stretch \$48	5:45 – 6:30pm Cr. Mvnt. Age 4-5 \$83	5:00– 6:00pm Int/Adv Tap \$91	5:00-6:30 Adv. Beg. Ballet \$102		5:30-6:30 Hip-Hop Age 10-18 \$91	5:00 – 6:30 Int/Adv. Modern/Jazz \$102	
6:30 – 8:00pm Int. Ballet \$102	6:30 – 7:30pm Intro (age 6-8) Ballet/Jazz \$91	6:00 – 8:00pm Adv. Ballet w/ pointe *\$110	6:30-7:30pm African Dance Inter- generational \$91	6:30 – 8:00pm Int./Adv. Ballet \$102	6:30-7:30 Beg. Ballet Age 8-12 \$91	6:30 – 8:30pm Adv. Ballet w/ pointe *\$110	6:30-8 Beg. Tap & Irish Age 8-12 \$102
				8:00 – 9:00pm Adult/Teen Ballet \$91	7:30-9:00pm Mixed Level Breakdance Age 7-Adult \$102		
		8:00 – 9:00pm Mixed Level Pilates \$91					

Tuition is payable by the session and prices above are for the entire six weeks. Classes are non-refundable. Students may make-up missed classes in any appropriate class, other than the one in which the student is registered. We reserve the right to cancel any class with insufficient enrollment. In this case, tuition will be refunded.

Please understand that it is important for Rep Ensemble dancers and serious students to continue training throughout the summer. Long breaks allow many muscles to weaken, and therefore set dancers back. Pointe students will **need** to take two ballet classes weekly, or one ballet with Advanced or Mixed Level Pilates taken different weekdays.

*These Advanced ballet classes will run for five weeks due to Ballet Rep Camp during the week of August 15.

Registration & Open House for Fall 2023-2024 School Year:

Saturday, August 26, 2023: 12:00noon to 7:00pm

Wednesday, August 30, 2023: 5 to 8:00pm

Pottstown Dance Theatre · 72 West Main Street · Pottstown, PA 19465 · 610-323-2569

Michelle Jones Wurtz, Director

www.pottstowndance.com

Registration & Release Form

Name: _____

Address: _____

Phone #: _____

Dance Camps/Classes that you wish to attend:

Where did you hear about us?

Medical information pertaining to movement:

Parents' Name (students under 21):
Not required for returning students.

Employer:

Occupation:

In case of emergency, contact:

Name Phone

I, _____, of
Name

_____, PA
City

do hereby assume all risk of personal injury (including loss of life) while attending and/or participation in any dance training. Acting for myself, my heir, personal parties, and assigns, do hereby release Pottstown Dance Theatre and its employees from all liability including claims at law, which may result directly or indirectly from my attending and/or participating in this dance school and/or any of its activities on or off the premises.

Date: _____ Sign: _____

Date: _____ Sign: _____

(Parent or Guardian for students under 21)