

**JUST DANCE! At Yorktown Stage**  
**REGISTRATION FORM 2024-2025**  
**(Use separate form for each Child)**

*Register Early!! All programs have limited enrolments and we do not want to cancel classes due to late enrolment.*

ONLINE: [www.yorktownstage.org](http://www.yorktownstage.org)

BY MAIL: Yorktown Stage, PO Box 877, Yorktown Heights, NY 10598

BY EMAIL: [barryysproducer@gmail.com](mailto:barryysproducer@gmail.com)

BY DELIVERY: Yorktown Stage, 1974 Commerce Street, Yorktown Heights, NY (Room 10)

*The fees: each class \$575/\$600; costume fees: single class \$150, double class \$190; registration \$65 Includes Recital Video*

**CHECK ALL CLASSES THAT APPLY**

**MONDAY**

Tap/Jazz (8-12)	4:15 – 5:15	<input type="checkbox"/>
Acting I (8-12)	4:15 – 5:15	<input type="checkbox"/>
Hip Hop/Lyrical (6-10)	5:15 – 6:30	<input type="checkbox"/>
Broadway I (8-12)	5:15 – 6:15	<input type="checkbox"/>
Intermediate Ballet (10-13)	6:15 – 7:30	<input type="checkbox"/>
Hip Hop/Lyrical (11-14)	6:30 – 7:45	<input type="checkbox"/>

**THURSDAY**

Tap/Jazz (10-14)	4:15 – 5:15	<input type="checkbox"/>
Adult Tap	5:15 – 6:15	<input type="checkbox"/>
Intermediate/Advanced Ballet (13-16)	6:00 – 7:30	<input type="checkbox"/>
Technique/Production 1	6:15 – 7:15	<input type="checkbox"/>
Technique/Production 2	7:15 – 8:15	<input type="checkbox"/>
Advanced Ballet (15-18)	7:30 – 9:00	<input type="checkbox"/>

**TUESDAY**

Beginner Ballet (6-10)	5:00 – 6:00	<input type="checkbox"/>
Intermediate/Advanced Ballet (13-16)	6:00 – 7:30	<input type="checkbox"/>
Petite Company (Invitation)	6:45 – 7:45	<input type="checkbox"/>
Junior Company (Invitation)	6:45 – 7:45	<input type="checkbox"/>
Advanced Ballet (16-18)	7:30 – 9:00	<input type="checkbox"/>
Senior Company (Invitation)	7:45 – 8:45	<input type="checkbox"/>

**FRIDAY**

Dance Exclusive (Invitation)	2:30 – 4:15	<input type="checkbox"/>
Ballet/Tap/Jazz (4-7)	4:15 – 5:15	<input type="checkbox"/>
Tap/Jazz (Invitation)	4:15 – 5:15	<input type="checkbox"/>
BippityBop (3-5)	5:30 – 6:15	<input type="checkbox"/>
Hip Hop/Lyrical (Invitation)	5:30 – 6:45	<input type="checkbox"/>
Intermediate Ballet (10-13)	6:15 – 7:30	<input type="checkbox"/>
Modern/Contemporary (13+)	6:45 – 8:00	<input type="checkbox"/>
Adult Ballet	7:30 – 8:30	<input type="checkbox"/>

**WEDNESDAY**

Acting I (8-12)	4:15 – 5:15	<input type="checkbox"/>
Acting 2 (Invitation)	4:15 – 5:15	<input type="checkbox"/>
Broadway I (8-12)	5:15 – 6:15	<input type="checkbox"/>
Broadway 2/3 (13+)	5:15 – 6:15	<input type="checkbox"/>
Beginner Ballet (6-10)	6:15 – 7:15	<input type="checkbox"/>
Acting 3 (Invitation)	6:15 – 7:15	<input type="checkbox"/>
Hip Hop/Lyrical (11-14)	7:15 – 8:30	<input type="checkbox"/>

**SATURDAY**

Beginner Ballet (6-10)	9:30-10:30	<input type="checkbox"/>
Intermediate/Advanced Jazz (11-15)	10:30 – 11:30	<input type="checkbox"/>
Advanced Jazz (15-18)	11:30 – 12:30	<input type="checkbox"/>
Honors Ballet	12:30 – 2:00	<input type="checkbox"/>
Honors Ballet	2:00 – 3:30	<input type="checkbox"/>

Child's Name: \_\_\_\_\_

Last First

Date of Birth: \_\_\_\_\_ Age Today: \_\_\_\_\_ Grade Fall 2024: \_\_\_\_\_ Boy / Girl (Circle)

Name of Primary Parent/Guardian: \_\_\_\_\_ Email Address \_\_\_\_\_

(REQUIRED) Confirmation of Registration will be sent by EMAIL ONLY

Address of Primary Parent/Guardian: \_\_\_\_\_

State & Zip

Phone Nos. Primary Parent/Guardian: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

(Please Be Sure To Add Area Code)

Name of Other Parent/Guardian: \_\_\_\_\_ Email Address \_\_\_\_\_

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**RELEASE STATEMENT:** I hereby release the Executive Director and all employees of YORKTOWN STAGE from all claims of liability for any damages or injuries, including Covid related illness, which may be sustained while my child is in Dance Class. I hereby give permission for my child's photograph to be used in Just Dance! At Yorktown Stage's advertising and promotions.

Signature of Parent / Guardian \_\_\_\_\_ Date: \_\_\_\_\_

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**IF PAYING BY CHECK (PREFERRED METHOD):**

AMOUNT ENCLOSED \$ \_\_\_\_\_

Check # \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank City \_\_\_\_\_

**IF PAYING BY CREDIT CARD:**

AMOUNT TO CHARGE \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_