

"Dancing with the feet is one thing, but dancing with the heart is another." ~ Anonymous

11th

NEW –
Zumba Class
Barre 3
Musical Theatre



Please send forms and checks to:
Sheena Villa Memorial Scholarship Fund
C/o Kathleen Treat
1521 Buck Hill Lane, Breinigsville, PA 18031
610-554-5968 – dancingforsheena@yahoo.com (Kim)
610-462-2791 – stepsintime@verizon.net (Kathleen)

Workshop Location:

Cedar Crest College
Steinbright Dance Studios
100 College Drive, Allentown, PA

"Dancing For Sheena" Dance Workshop Registration Form

Registration Information \$50 due by September 26th

Name: _____ Studio _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (____) _____ - _____ E-mail: _____ Age _____
 Parents Name: _____ Emergency Contact # (____) _____ - _____

Workshop Information

(*Workshop fees - \$50* includes all classes & Souvenir Tee** (**if registered by 9/26)

Intermediate (ages 9-12)

Advanced (ages 13+)

Intermediate Level			Advanced Level		
Class	Time	Location	Class	Time	Location
Registration	8:00 – 9:00		*Barre3	8:00 – 9:00	
Tap	8:30 – 9:30	Studio 2	Modern	9:00 – 10:00	Studio 1
Break	9:30 – 9:45		Break	10:00 – 10:15	
Musical Theatre	9:45 – 10:45	Studio 2	Jazz	10:15 – 11:15	Studio 1
Break	10:45 – 11:00		Break	11:15 – 11:30	
Hip - Hop	11:00 – 12:00	Studio 2	Ballet	11:30 – 12:30	Studio 1
Lunch Break	12:00 – 12:30	**ZUMBA	Lunch Break	12:30 – 1:00	
Jazz	12:30 – 1:30	Studio 1	Tap	1:00 – 2:00	Studio 2
Break	1:30 – 1:45		Break	2:00 – 2:15	
Ballet	1:45 – 2:45	Studio 1	Musical Theatre	2:15 – 3:15	Studio 2
Break	2:45 – 3:00		Break	3:15 – 3:30	
Modern	3:00 – 4:00	Studio 1	Hip Hop	3:30 – 4:30	Studio 2
Steinbright Dance Studios (Cedar Crest College)			Steinbright Dance Studios (Cedar Crest College)		

Class only (\$15.00)

Class & T-shirt (\$25.00)

**PUBLIC CLASSES - \$15.00/class (circle class) free to workshop dancer

BARRE3

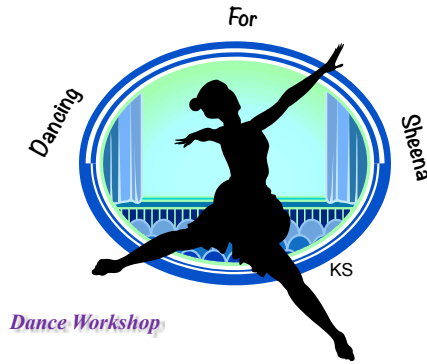
ZUMBA

Barre3 - 8:00 - 9:00 - Studio 1 - Zumba - 12:00 – 1:00 - Studio 2

*All proceeds will go to the Sheena Villa Memorial Scholarship Fund T-Shirts Size:

Youth Med Youth Lg Adult Sm Adult Med Adult Lg
 (check size) (Complimentary Souvenir t-shirt will be given to each workshop participant)

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October 8, 2017

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Please fill out and mail in release form prior to the event

Release Form*

**I, _____ the undersigned
Guardian (s) give permission for my child
_____ to attend Dancing for Sheena
Dance Workshop on Sunday, October 8, 2017. I also release the
staff of the workshop from any liability in the event of an accident
or illness during my child's time in their classes. I release them to
take appropriate action should my child need emergency medical
treatment as a result of an accident or illness.**

Parent and/or Guardian Signature

Date _____

**Dancers without a signed and dated release form will be prohibited from attending and/or participating in the "Dancing for Sheena Workshop."*