



REGISTRATION FORM

Name _____

Address _____

Professional _____ Town/City _____ State _____ Zip Code _____

Studio _____ Tel _____ Emergency Tel _____ E-mail _____

Parent Signature _____ Total Amount Enclosed _____

School _____ Register in person, by mail or by appointment between 8/30 and 9/10, 9AM-3PM.
Send this form along with a check to Art of Motion, Inc. Refunds honored due to medical or other emergency. Class credit given.

Offering _____ Fees:
\$250.00/Class/Fourteen weeks, \$225.00/class second class, \$20.00/Registration fee
Open Class/Ten Class card \$135.00

Classes _____ Private or semi private vocal: \$75.00/\$25.00 Semi private (3-4/class)
Tuesday 3:30 4:30 5:30 6:30 7:30 Thursday 3:30 4:30 5:30 6:30 7:30
(No class when Ridgewood Public Schools are closed.)

In _____ Please state all allergies: _____

**Place a check mark under your choice of class.
Write in the Day, Time and Grade (if necessary) of the class chosen from the Art of Motion schedule.**

| | | | | | | | | | | | |
|----------------|---------------------|--------------------|---------------------|------------------------------|-----------------|-------|------|----------------------|-----|------|-------|
| Ballet | Ballet | Int. Adult | Adv. Adult | Int. Teen & Adult | Pointe Adv. | I | II | Stretch & Adagio | Day | Time | Grade |
| Modern | | | | | | | | | | | |
| Jazz | Modern | Grade K-2 | Grade 3-5 | Int. Grade 6-8 | Int. Grade 9-12 | Adult | | | Day | Time | Grade |
| Pilates | | | | | | | | | | | |
| Tap | Jazz/Tap | Beginner Grade 2-5 | Grade 6-8 | Adult | | | | | Day | Time | Grade |
| Theatre Dance | | | | | | | | | | | |
| Yoga | Yoga | Anusara Style | Kripalu Scene Study | Kripalu Grade 1-6 | Teen | | | | Day | Time | Grade |
| Yoga | | | | | | | | | | | |
| Improvisation | Tap | Adult | | | | | | | Day | Time | Grade |
| Composition | | | | | | | | | | | |
| Vocal | Jazz | Int/Adv | | | | | | | Day | Time | Grade |
| Privates | | | | | | | | | | | |
| Master Classes | Triple Threat | I Grade 2-5 | II Grade 6-12 | | | | | | Day | Time | Grade |
| Special Events | | | | | | | | | | | |
| Performances | Pilates/Yoga | Day | Time | Movt. Together Adult & Child | | Day | Time | Social Dance Couples | | Day | Time |
| | | | | | | | | | | | |
| | Pilates | Day | Time | Creative Movement | | Day | Time | Scene Study | | Day | Time |
| | | | | | | | | | | | |
| | Pre/Post Natal Yoga | Day | Time | Pre-Ballet 4-6 Years | | Day | Time | Rehearsal | | Day | Time |
| | | | | | | | | | | | |