

200 SE Gateway Drive Suite #114 515-986-9340

www.grimessuperstars.com

SUMMER SCHEDULE 2018

June 13th - July 26th
No classes July 4th & 5th

All Registered Classes will be held on Wednesday & Thursday Nights!!!

Schedule is Subject to Change based on class enrollment.

BLUE STUDIO - Wednesday Nights		GREEN STUDIO - Wednesday Nights				
	Miss Anne	Miss Kelsy				
5:15-5:45	PreK 3's Dance	5:15-5:45 PreK 4's/K Dance				
5:45-6:15	Hip Hop 3rd-4th	5:45-6:15 Tumbling PreK/K/1st/2nd				
6:15-6:45	Dance I/II 1st-2nd	6:15-6:45 Cheer K-2nd				
6:45-7:15	Hip Hop I/II 1st-2nd	6:45-7:15 Tumbling 3rd & up				
7:15-7:45	Dance Technique 5th-7th	7:15-7:45 Cheer 3rd & up				
7:45-8:15	Jazz 5th - 7th	7:45-8:15 Poms for Dance Team 8th & up				
8:15-8:45	Dance Technique 8th & Up	8:15-8:45 Poms for Dance Team 5th-7th				
8:45-9:15	Jazz 8th & up					
Thursday Nights						
	Miss Lorainna					
5:30-6:00	Dance III 3rd-4th					
6:00-6:30	Hip Hop 5th-7th					
6:30-7:00	Tap Technique 5th-7th					
7:00-7:45	Leaps & Turns 4th-7th					
7:45-8:15	Tap Technique 8th & up					
8:15-8:45	Hip Hop 8th & up					
8:45-9:30	Leaps & Turns 8th & up					
	SUMMER TUITION & FEES					
30 Minute Class = \$50 for 6 Week Session 45 Minute Class = \$65 for 6 week session Per Student Multi Class Discount = 20% off each additional class						

Registration begins Monday, April 2nd

DATE:



Summer Registration Form 2018

Welcome to Grimes Superstars Summer Session 2018! If you have any questions, please feel free to contact our office at 515-986-9340 or via email at info@grimessuperstars.com.

Jay Peterson, Dawn Reed, Jamie Stringer and Lorainna Nedved Co-Owners/Directors

LAST NAME (OF STUDENT'S HOUS	SEHOLD)					
HOME PHONE NUMBER	CELL PHONE	CELL PHONE NUMBER				
ADDRESS	CITY	CITY				
Guardian's Name(s)						
Primary Phone #	Secondary Phone #					
E-mail address						
Person(s) Responsible for Pa	yment (if different from above)					
Evening Phone #		E-mail address				
STUDENT INFO	ORMATION					
LAST NAME	FIRST NAME	M/F	Age	Birth date	Grade (Fall 2018)	
LAST NAME	FIRST NAME	M/F	Age	Birth date	Grade (Fall 2018)	
LAST NAME	FIRST NAME	M/F	Age	Birth date	Grade (Fall 2018)	

^{*} Please turn form over to read and sign *

2018 Release Statement

I fully understand that staff members are not physicians or medical practitioners of any kind. With that in mind, I hereby release the staff of JDJ Performing Arts of Grimes, LLC dba Grimes Superstars to render temporary first aid to my child or children in the event of any injury or illness, and if deemed necessary by the staff to seek medical help, including transportation by staff member and or its representatives, whether paid or volunteer, to any health care facility or hospital, or the calling of an ambulance for said child should the staff deem this to be necessary.

We, the staff JDJ Performing Arts of Grimes, LLC dba Grimes Superstars, recognize our obligation to make our students and their parents aware of the risks and hazards associated with the sport of twirling, tumbling, trampoline, cheerleading, dance, acrobatics, and/or specialized sports training. Students may suffer injuries, possibly minor, serious or catastrophic in nature. Twirling, Tumbling, Cheerleading, Dance, Acrobatics, and/or Specialized Sports Training can be dangerous and can lead to injury or death. Parents should make their children aware of the possibility of injury and encourage their children to follow all the safety rules and the coaches' instructions.

Coaches, teachers and other staff members, will not accept responsibility for injuries sustained by any student during the course of Twirling, Tumbling, Trampolining, Acrobatics, Cheerleading, Dance, and/or Specialized Sports Training open workouts, or in the course of any exhibition, competition or clinic in which he or she may participate or while traveling to or from the event.

With the above in mind, and being fully aware of the risks and possibility of injury involved, I consent to have my child or children participate in the programs offered by JDJ Performing Arts of Grimes, LLC dba Grimes Superstars and/or its representatives whether paid or volunteer.

I also affirm that I now have and will continue to provide proper hospitalization, health and accident insurance coverage which I consider adequate for both my child's protection and my own protection.

I also understand that it is the parents' responsibility to warn the child about the dangers of tumbling and injury. Staff will only warn the child through "Safety Messages" and our teaching style and progressions.

I have read the policies, fees and payment plans. I agree to follow the rules as stated in the policies of the JDJ Performing Arts of Grimes, LLC dba Grimes Superstars. If I fail to follow the rules as stated, I know that my child will be dropped from classes. I agree to make the payments required for my child(ren) to participate in the classes he/she/they are registered for and all other fees and merchandise involved. I also agree to pay any late fees outlined in these policies, legal fees, mediation or court costs if the Superstars have to pursue payment of my account.

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Parent or Guardian Signature		Date
EMERGENCY CONTACT INFORMATION Please provide an additional contact, other than the students parent or guard	an, we could contact in case	of emergency.
Student Name(s)		
Name Phone	Relation	onship
Hospital Preference	Family Physician	

Please provide any additional medical information we should know in the event of an emergency (i.e.: allergies, medications, etc) below: