



# Montville Recreation Department's **DANCE FUSION** **CLASSES**



**WHO:** Ages 3 to 5

**WHAT:** **Dance Fusion Classes** — This class is a combination of fun and movement! During the length of the session children will explore a variety of different dance styles and concepts. Your child will learn a various dance styles by sampling different genres and working on different skills each class. A combination of creative movement, ballet, musical theater and hip hop will be incorporated in this upbeat class.

**WEAR:** Comfortable Clothing & Sneakers.

**WHERE:** Montville Community Park Field House, 130 Change Bridge Road in Montville 07045

**WHEN:** Thursdays: January 12, 19, 26, February 2, 9, 16, 23, March 2, 9, 16, 23 & 30 from 10:00am to 10:45am

**INSTRUCTOR:** Miss Melody of Just Dance Academy— [www.justdanceacademy.com](http://www.justdanceacademy.com)

**COST:** \$135.00 per person for the 12 (twelve) week program. **NOTE:** There will be a \$5.00 processing fee for program refunds!

**PAYABLE TO:** Montville Recreation, 195 Change Bridge Road, Montville 07045

### **REGISTRATION PROCEDURE:**

1. In Person 2. Mail 3. On-Line OR 4. Payment Drop Box in Municipal Building's Parking Lot

**Checks or Cash Only for In-Person Registration OR Checks Only for Mail or Payment Drop Box!!!**  
**OR Credit Cards for On-Line Registration!**

**Please Note: You will be charged a 3 % convenience fee for credit card use on-line!**

**For On-Line Registration !!!** Go to the town's website at: <http://www.montvillenj.org/RecRegistration>

For additional Recreation Flyers go to: <http://www.montvillenj.org/RecFlyers>

**CLASS SIZE IS LIMITED !!! FIRST COME, FIRST SERVE !!!**

**QUESTIONS ??? Call Recreation: (973) 331-3305 or Visit our Website: [www.montvillenj.org](http://www.montvillenj.org)**

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## **DANCE FUSION CLASSES - Winter 2017**

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL (Please distinguish between letters & numbers! ) \_\_\_\_\_

EMERGENCY NAME & NUMBER \_\_\_\_\_

Please list any special needs that your child may have that will assist us in providing a successful experience:

\_\_\_\_\_

My child has my permission to participate in this program.

I understand that the Recreation Department **DOES NOT** provide accident insurance.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICE USE (11/30):** Fee Paid \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Date \_\_\_\_\_ Received By \_\_\_\_\_ **Program # 852**