

What is TEMPO TOTS?

Tempo Tots is ideally designed for the pre-competitive dancer transitioning into our competitive program. In this program, dancers will receive 3 hours of training daily, where they will develop and increase their flexibility, technique and skills needed to flourish as they progress into a higher level of dance.

If your young dancer likes a challenge, and is heading into our competitive program in the fall, or would even like to expand their dance styles and try something new, then this is the program for them! Throughout the week, your dancer will learn progressions in each dance genre as well as learn a combination of movement and choreography. This will then be showcased on the final day of the week for parents and friends to enjoy!

Register Early!

*Registrations received by June 30th
save 5% gst!*

Dance Unlimited also offers 6 year & over classes in:

*BALLET, TAP, JAZZ, HIP HOP, LYRICAL,
CONTEMPORARY, UKRAINIAN & MUSICAL THEATRE!*



TEMPO TOTS

SUMMER PROGRAM FOR DEVELOPING YOUNG
DANCERS AGED 5-7 YEARS
(minimum 1 year of dance training required)



**AUGUST 13-17
2018**

MORE ABOUT THE PROGRAM

*Dancers will receive 3 hours of instruction in Ballet, Jazz, Tap and Hip Hop daily

*Students will receive one 30 minute lunch break each day (please pack a nutritious meal for your dancer)

*Proper dance attire is mandatory (please see below) and dancers should bring ballet, tap and jazz shoes as well as indoor runners for hiphop

GIRLS: Bodysuit and tights or tight fitting tank top and shorts are appropriate for summer school.

Hair must be tied back in a ponytail or bun

BOYS: T-shirt and shorts

***Rate: \$195 plus GST** made payable to DANCE UNLIMITED

(registrations received by June 30th save 5% GST!)

***Ages are approximate. Student placement is at the discretion of Dance Unlimited staff*

Studio Address:

201, 4935-55 Avenue Edmonton, Alberta
Phone: 780-450-6147
E-mail: info@danceunlimitedcorp.com
www.danceunlimitedcorp.com

TEMPO TOTS

Registration Information:

Student Name: _____

Parent/Guardian Name: _____

Address: _____

City: _____ P.C.: _____

Phone (home): _____

Phone (work): _____

E-mail: _____

Age: _____ Birthdate: _____

Personal Health #: _____

Medical conditions (Allergies, asthma, etc.):

Emergency Contact: _____

Emergency Contact Phone: _____

Office Use Only

PAYMENT

Method: _____

Date: _____

Authorization: _____

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