

# **DEJUL SCHOOL OF DANCE**

## **CURRICULUM**

### **TUMBLING, CREATIVE MOVEMENT, PRE-BALLET**

**(Ages 2 ½ to 3)**

**One-half hour classes meet once a week.**

### **COMBINATION TUMBLING, BALLET, TAP AND BATON**

**(Ages 4 to 6)**

**One hour classes meet once a week.**

### **SPECIALTY CLASSES IN THE FOLLOWING**

**(Ages 7 and up)**

**Acrobatics**

**Ballet**

**Jazz**

**Tap**

**Baton**

**One-half hour classes meet once a week.**

### **POINTE PROGRAM**

**(Ages 11 and up)**

**Students must also attend at least one other ballet class during the week.**

**All classes run from September through May ending with our Annual Spring Recital the 2<sup>nd</sup> weekend in June.**

## **REQUIRED ATTIRE**

**Girls:** Leotards are a must (black only)  
Either white or pink tights  
Hair must be secured back or up, away from face  
No costumes

**Boys:** Jazz pants or biker length shorts (black only)  
T-shirt (white or black only)

## **GENERAL INFORMATION**

All students of Ballet must wear PINK ballet shoes  
Students of Jazz must wear BLACK slip on  
Students of Tap must wear BLACK flats or Jazz taps

## **STUDENTS OF POINTE**

Only BLACK leotard with PINK or White tights  
Hair must be worn up or back

## **TUITION**

Registration Fee \_\_\_\_\_ Non-refundable

\_\_\_\_\_per month: One half hour class weekly

\_\_\_\_\_per month: One hour combination class weekly

\_\_\_\_\_per month: Three or more One half hour  
classes weekly

Make checks payable and mail to: DeJul School of Dance  
w/registration form Box 87  
Franklinton, Pa 17323

# REGISTRATION FORM

---

**Student's Name (Please Print)**

**Age:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

---

**Address**

---

**Phone #**

**Phone #**

---

**Parental and or Guardian Name (Print)**

---

**Signature**

**Has student had previous lessons? If so, where, in what areas and how many years?**

---

**Please enroll student in the following Class/Classes**

\_\_\_\_\_ **Tumbling, Pre-Ballet (ages 2 ½ to 3)**

\_\_\_\_\_ **Combination Class (ages 4 -6)**

**Specialty Class/Classes (ages 7 and up)**

\_\_\_\_\_ **Ballet** \_\_\_\_\_ **Jazz** \_\_\_\_\_ **Tap**

\_\_\_\_\_ **Pointe** \_\_\_\_\_ **Baton** \_\_\_\_\_ **Acrobatics**

**If there are any medical conditions, special needs or medication student presently has or needs, please indicate below:**

---