



REGISTRATION FORM: Sheila Stevens TCEG, ADCRG ([shamrocksheila@comcast.net](mailto:shamrocksheila@comcast.net))  
 Shannon Barry TCRG ([shamrockbarry@gmail.com](mailto:shamrockbarry@gmail.com))

Summer Session Registration: **The 50% deposit is nonrefundable unless the week is canceled. You will be contacted only if your week is not available.** Please fill out the registration form attached and mail it in as soon as possible. WE WILL CONTACT YOU TO CONFIRM YOUR CLASS VIA EMAIL SO PLEASE GIVE US YOUR EMAIL ADDRESS.

Dates for summer session accelerated learning week:

**\*\*\*Session 1 \*\*\***

**JUNE (Monday through Thursday)**

**WEST HARTFORD STUDIO: June 7<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup>, & 10<sup>th</sup>**

**PLAINVILLE STUDIO: June 14<sup>th</sup>, 15<sup>th</sup>, 16<sup>th</sup>, & 17<sup>th</sup>**

**5pm to 6pm:** New students as well as 1st year dancers **FEE \$90** (all ages)

**6pm to 7pm:** 2nd & 3rd year dancers **FEE \$90** (all ages)

**7pm to 8pm:** 4th yr and up novice/prizewinner dancers **FEE \$90** (all ages)

**\*\*\*Session 2 \*\*\***

**AUGUST (Monday through Thursday)**

**WEST HARTFORD STUDIO: August 9<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup>, & 12<sup>th</sup>**

**PLAINVILLE STUDIO: August 16<sup>th</sup>, 17<sup>th</sup>, 18<sup>th</sup>, & 19<sup>th</sup>**

**5pm to 6pm:** New students as well as 1st year dancers **FEE \$90** (all ages)

**6pm to 7pm:** 2nd & 3rd year dancers **FEE \$90** (all ages)

**7pm to 8pm:** 4th yr and up novice/prizewinner dancers **FEE \$90**

Class Location, \_\_\_\_\_ Week & Time requesting: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_ **E-Mail-** \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Emergency Person & Number to Contact :( please print) \_\_\_\_\_

Medical issues (asthma, seizures, diabetes, requiring medication) YES or NO If yes, parent needs to be close by during class list why: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

**Mail registration form and deposit to:  
 Shannon Barry 161 Colonial St, West Hartford, CT 06110**