Inspiring the next generation!

HIP HOP DANCE

Thursday

Reception to Year 6

3.30pm to 4.15pm

£8.50 per week/per child

Spring Term (9 weeks)

Start of term: 11th January 2024 (5 weeks)

Half term: 19th February 2024

End of Term: 21st March 2024 (4 weeks)

no class on 29th February 2024

CALLING ALL YOUNG TALENTS! JOIN OUR HIP HOP CLASS FOR A MAGICAL JOURNEY. LEARNING THE STYLE OF HIP HOP DANCING TOGETHER IN A FUN ENVIRONMENT – THIS CLASS IS DESIGNED TO HELP DEVELOP CHILDREN'S PERFORMANCE SKILLS, STAMINA, EXPRESSION, CHARACTERISATION! IF YOU WOULD LIKE YOUR CHILD TO ATTEND, PLEASE RETURN THE BOOKING FORM PROVIDED BELOW TO OUR OFFICE EMAIL ADDRESS.



BOOST CONFIDENCE, DEVELOP CREATIVITY AND HAVE FUN WITH FULLY TRAINED AND DBS CHECKED TEACHERS.

07903672216



THEATRESCHOOL@CANDICECONWAY.CO.UK

WWW.CANDICECONWAYTHEATRESCHOOL.CO.UK

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NAME	
D.O.B	SCHOOL YEAR
CURRENT EMAIL	······································
CURRENT MOBILE NUMBER	•••••••••••••••••••••••••••••••••••••••
SECOND CONTACT MOBILE NUMBER	
ADDRESS:	
	••••••
MEDICAL/ALLERGIES/ NEUROLOGICAL NEEDS:	
CONSENT FOR PHOTOGRAPHY (PROMOTIONA YES/NO	L PURPOSES ONLY/ PLEASE CIRCLE):
PREVIOUS EXPERIENCE (GRADES AND SYLLAB	US)
SIGNED	DATE

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PAYMENT DETAILS

WE ARE HAPPY TO CONFIRM WE CAN ACCEPT CHILDCARE VOUCHERS/TAX FREE CHILDCARE AS FORM OF PAYMENT FOR OUR CLASSES.

BANK TRANSFERS MAY BE MADE TO THE FOLLOWING ACCOUNT:
PLEASE KINDLY USE THE REFERENCE NUMBER STATED ON YOUR INVOICE

PLEASE WAIT TO PAY UNTIL YOU HAVE RECEIVED AN INVOICE.

CANDICE CONWAY THEATRE CAMPS LTD

BARCLAYS

SORT CODE: 20-74-12

ACCOUNT NO: 73982319

CCTS TERMS AND CONDITIONS

PAYMENTS AND REFUNDS POLICY: SPACES ARE NOT CONFIRMED UNTIL INVOICES HAVE BEEN PAID.

ALL FEES MUST BE PAID PRIOR TO CLASSES COMMENCING, FAILURE TO DO SO MAY INCUR AN ADMIN FEE TO YOUR TERM FEES.

IF FEES HAVE NOT BEEN PAID AFTER SEVERAL EMAIL REMINDERS ONCE THE TERM HAS COMMENCED, YOU MAY INCUR A LATE PAYMENT FEE OF 2% PER WEEK OF YOUR TERMLY FEES FOR EACH WEEK THE FEES REMAIN UNPAID.

SHOULD CLASSES NOT BE ABLE TO CONTINUE OR SHOULD YOU/YOUR CHILD NOT BE ABLE TO ATTEND CLASS DUE TO ANY ILL HEALTH RELATED REASONS THEN UNFORTUNATELY WE WILL NOT BE ABLE TO REFUND FOR ANY SESSIONS LOST.

SHOULD WE OURSELVES HAVE TO CLOSE THE CLASS FOR ANY REASONS BEYOND OUR CONTROL THEN WE SHALL USE YOUR REMAINING CREDIT FOR ALL FUTURE CLASSES INCLUDING VIRTUAL CLASSES SHOULD THIS BE NECESSARY.

ONCE COMMITTED AND PAID FOR A TERM THEN UNFORTUNATELY WE DO NOT OFFER REFUNDS AS THE SPACE HAS BEEN RESERVED FOR YOUR CHILD FOR THE TERM.

YOU ARE LIABLE TO PAY FOR YOUR CHILD'S FULL TERM FEES ONCE COMMITTED TO THE CLASS.

BY SIGNING THIS FORM I AM AGREEING TO THE CCTS TERMS AND CONDITIONS ABOVE FOR MY CHILD.

(CHILD'S NAME)	
CLASS	
SIGNED BY	DATE

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EXPECTED COSTS:

HERE AT CCTS WE PRIDE OURSELVES ON MAKING THINGS AS AFFORDABLE AS POSSIBLE, THIS IS WHY WE SET OUT EXPECTED COSTS.

TERM 1: APPROPRIATE GROOMING AND CORRECT UNIFORM IS ESSENTIAL TO TRAINING THE HIGHEST STANDARDS OF TECHNIQUE WITHIN EACH DANCE STYLE. THEREFORE, ALL STUDENTS WILL BE EXPECTED TO PURCHASE THE CORRECT UNIFORM. THE CHILDREN MUST WEAR OUR THEATRE SCHOOL T-SHIRT, BLACK LEGGINGS, BLACK TRACKSUIT BOTTOMS OR JAZZ PANTS AND JAZZ SHOES. WE ARE SO EXCITED TO ANNOUNCE OUR ONLINE SHOP AND UNIFORM. THIS CAN NOW BE DELIVERED STRAIGHT TO YOUR DOOR. https://ccts.team-togs.com/shop/gridorderform.php PLEASE NOTE THAT PARENTS ARE ONLY EXPECTED TO PURCHASE A CCTS T-SHIRT.

TERM 2: SHOW FEE OF £25. PLEASE NOTE THAT THE SHOW IS OPTIONAL AND CHILDREN MAY STILL ATTEND CLASSES EVEN IF THEY DO NOT WISH TO PARTICIPATE IN THE SHOW. THE REHEARSAL FEES WILL GO TOWARDS VENUE HIRE AND EXTRA STAFFING.

TERM 3: COSTUME FEES, WE DO TRY TO KEEP THE COSTUMES FEES DOWN. LETTERS CONFIRMING THIS WILL BE GIVEN OUT DURING SHOW TERM. IN ORDER TO KEEP THE COSTS DOWN WE DO SOMETIMES ASK PARENTS TO PROVIDE CERTAIN ITEMS, THIS DOES MEAN THAT THERE WOULDN'T BE A COSTUME FEE FOR YOU. PLEASE NOTE THAT YOU DO GET TO KEEP ALL OF THE COSTUMES. SHOW TICKETS WILL BE AN ADDED EXPENSE WITH THE OPTION TO PURCHASE A DIGITAL DOWNLOAD TOO.

BY SIGNING THIS FORM I AM AGREEING TO THE CCTS TERMS AND CONDITIONS ABOVE FOR MY CHILD.