



2001 Municipal Court
 Harrison City, PA 15636
 (724) 392-4555
 (724) 744-2172-fax

Mon-Fri, 9:00am-4:00pm
 www.ptarc.org
 Facebook.com/ptrecreation

**REGISTER ON-LINE
 ON OUR WEBSITE:
 WWW.PTARC.ORG**

Questions? Call us, we're here to help!

PTARC DANCE CLASSES WITH MS. JOLENE

BABIES 'N BALLET Ages 2-4

Learn basic steps and ballet positions. Class will introduce ballet to help develop balance, timing and creative expression. Wear leotard or shorts & t-shirt & ballet slippers.

Instructor: Ms. Jolene

Location: PT Ambulance Center

Time: Fridays, 5:00-5:30 pm

6 Week Session: January 24-February 28

Fee: PTSD Residents \$29, Non-Residents \$37



TUMBLE TIME Ages 3-5

Develop balance and tumbling skills. Group activities work on gross motor skills and teamwork while having fun! Wear comfortable clothes.

Instructor: Ms. Jolene

Location: PT Ambulance Center

Time: Fridays, 5:45-6:15 pm

6 Week Session: January 24-February 28

Fee: PTSD Residents \$29, Non-Residents \$37



JAZZ-MA-TAZZ Ages 4-6

Jazz dance is a fun and energetic style. The class includes a warm-up with stretching, isolations, strengthening exercises and then moves across the floor to work on turns, leaps, jumps and runs. Each class ends with a fast paced combination. Intro to Jazz is perfect for the young dancer and focuses on coordination.

Instructor: Ms. Jolene

Location: PT Ambulance Center

Time: Fridays. 6:15-6:45 pm

6 Week Session: January 24-February 28

Fee: PTSD Residents \$29, Non-Residents \$37



ADULT TAP FOR FUN & FITNESS Ages 15+

Stomp away stress while slimming down your thighs, as well as improving coordination for both guys & gals! Twenty minutes of dancing increases your heart rate equal to low impact aerobics. Relaxed pace highlighting basic steps and combinations to music. Hard shoes required, tap shoes recommended.

Instructor: Ms. Jolene

Location: Fridays, 7:00-7:45 pm

6 week session: January 24-February 28

Fee: PTSD Residents \$29, Non-Residents \$37



2020 PTARC Dance Classes with Ms. Jolene

Participant Name _____

Address _____

EMAIL Address _____

City _____ Zip _____ Birthdate _____ Age (if under 18) _____

Please circle where you live: Penn Borough Manor Trafford Penn Township Non-Resident

Primary Phone _____ Alternate Phone _____

Program Name/Start Date/Time _____

Adult participant signature required below. Parent signature required below for all participants under the age of 18.

The undersigned individual (parent or guardian if under age 18) represents that the registrant is in good health and can participate in the above listed activity and with prior knowledge of the physical nature of the activity releases Penn-Trafford Area Recreation Commission (PTARC), and Department, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees from any and responsibility for injury to the registrant through negligence or otherwise while he/she is participating in the activity. The parent, guardian, or participant assumes all risks inherent in the activity and will hold the Penn-Trafford Area Recreation Commission and Department, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees harmless from any and all claims or causes of action that may arise from this activity. The undersigned individual also hereby gives permission to Penn-Trafford Area Recreation Commission to use photographs of the participant for the promotion of Penn-Trafford Area Recreation events and programs. The participant agrees to hold the Penn-Trafford Area Recreation Commission, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees free and harmless from liability of any nature.

Keep top portion

*Cut & mail bottom
 portion to:
 PTARC
 2001 Municipal Ct.
 Harrison City, PA
 15636*

*Make checks
 Payable to PTARC*

***PARENT or Guardian SIGNATURE**

DATE

**** Pre-Registration Required If you'd like to pay by credit card please visit www.ptarc.org**