

Fall/Winter '18 -'19 Class Schedule

Classes ultimately cluster around a certain age group. Choose the class that is best for your child(ren). You will be notified if it is not a good fit.

PELHAM - Jump Dance Center
139 Wolfs Lane

Sundays 9:15, 10:15
Mondays 9:15, 10:10, 11:20, 12:45

LARCHMONT – Excel
2097 Palmer Ave.

Mondays 3:45
Wednesdays 9:15

BRONXVILLE - Bronxville Women's Club
135 Midland Ave.

Tuesdays 3:35, 4:30
Wednesdays 10:35, 11:30, 12:45
Thursdays 9:15, 10:10, 3:35

NEW ROCHELLE - Beth El Synagogue
1324 North Ave. (entrance on Northfield Rd.)

Tuesdays 9:30, 10:30, 11:30, 12:45
Wednesdays 4:30

SCARSDALE - Andrea's Dance Studio
209 Brook St. (near White Plains Rd.)

Thursdays 11:45, 12:45

RIVERDALE – The Whitehall Club
3333 Henry Hudson Parkway

Fridays 9:30, 10:30, 11:30

Tuition and Important Information

Tuition includes music download and songbook. \$435 for 14 weekly, 45-min. classes. First sibling in same class is \$245. Second sibling in same class is \$120. *15% discount if enrolling with a friend NEW to Shake, Rattle & Roll. * Infants under 6 mos. are free with registered older sibling in the same class. They must be listed on form. You can pay by credit card at **shakerattleandrollmusic.com** or use attached form and pay by check.

Class Dates

Sundays: September 16, 23, 30
October 14, 21, 28
November 4, 11, 18
December 2, 9, 16
January 6, 13

Mondays: September 17, 24
October 1, 15, 22, 29
November 5, 19, 26
December 3, 10, 17
January 7, 14

Tuesdays: September 18 (NR only)
September 25 and Oct. 2 (Bxv only)
October 9, 16, 23, 30
November 6, 13, 20, 27
December 4, 11, 18 (NR only)
January 8, 15

Wednesdays: September 12, 26
October 3, 10, 17, 24, 31
November 7, 14, 28
December 5, 12
January 9, 16

Thursdays: September 13, 20, 27
October 4, 11, 18, 25
November 1, 8, 15, 29
December 6, 13
January 10

Fridays: September 14, 21, 28
October 5, 12, 19, 26
November 2, 9, 16, 30
December 7, 14
January 11

Director – Susan V. Davis
susan@shakerattleandrollmusic.com
(914) 813-0743

Fall/Winter '18-'19 Registration Form

Parent's Name _____

Address _____

Home Phone _____

Cell Phone _____

E-mail _____

Child's Name _____

Date of Birth M/D/Y _____

Sibling(s) Attending _____

DOB M/D/Y _____

Caregiver (if bringing child to class) _____

Location/Day/Time _____

2nd Choice Location/Day/Time _____

Fall/Winter Semester (14 Classes)
\$435 1st child, \$245/1st sibling in same class, \$120/2nd sibling in same class

Register with a friend NEW to Shake, Rattle & Roll and you each get 15% off your tuition

Name of friend _____

Total Enclosed: _____

Make check payable to *Shake, Rattle & Roll* and mail, along with completed registration form, to *Shake, Rattle & Roll, 703 Webster Ave., New Rochelle, NY 10801*. Registration will be confirmed by e-mail.

Photos and video taken of my child, caregiver and/or me at Shake, Rattle & Roll may be used for promotional purposes. No names will appear.

Parent's Signature _____

Date _____