Ruth Page Center School of Dance

Ruth Page Center for the Arts
1016 N. Dearborn St.
Chicago, IL 60610
summerintensive@ruthpage.org
312-337-6543

Summer Dance Bootcamp July 21 – August 1, 2025

For dancers ages 7 - 14* *10:00am – 3:20pm, Monday – Friday*

**Dancer must be 7yrs on 06.01.2025*

Ruth Page School's Keystone Dance Academy invites young dancers to join a fun, focused, mini-intensive this summer. Students will work with teachers specially curated from Ruth Page School, Keystone Dance Academy, and the Chicago dance community. Each week will feature a focused selection of beginning and intermediate dance techniques including ballet, hip hop, jazz, tap, and West African, along with yoga and Pilates classes. Bootcamp concludes with a showcase in the Ruth Page Center Theater and Ice Cream Social Reception on the second Friday.

Registration is on a weekly basis – students may choose to attend for one or both weeks! Classes in the Summer Dance Bootcamp are not sold individually or by the day. Tuition is due in full on or before July 15th, 2024.

Optional lunches are available for an additional $70 per week. Lunch menus will vary day to day. Please notify us of any dietary restrictions and mark your week selection on the back of this form. Lunches are not sold individually. Dancers who do not opt into this program will need to bring a sack lunch.

Tuition: one week- $450 two weeks- $900

Group A/B	Monday	Tuesday	Wednesday	Thursday	Friday
10:00-11:00am	Yoga	Pilates	West African	Pilates	West African
11:00-12:15pm	Jazz/Ballet	Jazz/Ballet	Jazz/Ballet	Jazz/Ballet	Modern
12:15-12:45pm	Lunch	Lunch	Lunch	Lunch	Lunch
12:45-1:55pm	Ballet/Jazz	Ballet/Jazz	Ballet/Jazz	Ballet/Jazz	Hip Hop
2:05-3:00pm	Hip Hop	Tap	Hip Hop	Tap	Rehearsal
3:00–3:20pm	Games	Journal	Games	Journal	Rehearsal

*Showcase and Ice Cream Social Reception on Friday, August 1st at 2:30 pm

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2025 Summer Dance Bootcamp

Student Name: _____ Birthdate: _____
Guardian Name: _____ Age on June 1, 2025: _____
Address: _____
City: _____ State: _____ Zip: _____
Email Address: _____ Primary Phone: _____
Emergency Contact Name: _____ Relationship: _____
Emergency Phone: _____ Emergency Email: _____
Injuries/Allergies: _____
(attach additional pages as necessary)

	Week 1	Week 2
Dates:	Mon, July 21 – Fri July 25	Mon, July 28 – Fri, Aug 1
Attending:	☐	☐

T-Shirt Size (choose 1)
Youth: S ☐ M ☐ L ☐ XL ☐
Adult: XS ☐ S ☐ M ☐ L ☐ XL ☐

2025 Rates		
Both Weeks 07.21-08.1.2025	$900	☐
1 Week (please mark above)	$450	☐
Registration Fee	$75	☐
Lunch (optional) Week 1	$80	☐
Lunch (optional) Week 2	$80	☐
TOTAL:		
One-Time Payment		☐
Monthly Payments (Feb, Mar, Apr, May, June)	15th	☐

Payment: CC _____ Check _____ Cash _____
Credit Card # _____
Exp. Date _____ CVV _____
Payment is due in full by July 15, 2025. For tuition assistance or additional payment arrangements, please contact Cara Wedeking (cara@ruthpage.org).

Signature: _____

Liability Waiver: I am aware dance training can place stress on the body and has a risk of physical injury. It is also understood that dance instruction involves kinetic corrections that may include physically touching students as part of regular class work and rehearsals. I and /or we agree and release full responsibility for all risks related to participating and attending classes/programs with the Ruth Page Foundation. By signing this release form, I/we (the dancer and parent/guardian) assume all risks related to the use of any and all spaces used by the Ruth Page Foundation. I/we agree to release and hold harmless the Ruth Page Foundation including its teachers, dancers, staff members, and facilities from any cause of action, claims, or demands now and in the future. I/we will not hold the Ruth Page Foundation liable for any personal injury or any personal property damage which may occur on the premises before, during, or after classes. In the case of a medical emergency, the Ruth Page Foundation will make every effort to contact the listed telephone numbers on file as soon as possible. In case the Ruth Page Foundation cannot, I/we give consent for the staff to secure the necessary health care in an emergency. Initial here _____

Photo Release: In addition, for valuable consideration received, I grant the Ruth Page Foundation the unrestricted right to use and publish photographs or video footage of student for PR, promotional use, editorial, and advertising for the Ruth Page Foundation print, projects, brochures, press, and website or any social media. I understand student's name will not be published, unless given permission. I have read the above terms of this agreement, understand same and agree to be bound by each and every item. Initial here _____