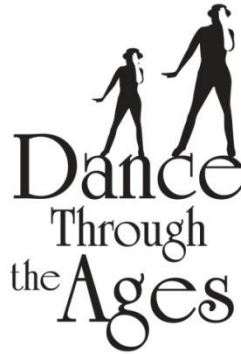


DTTA 2024-2025

Recital Theme!

*“Here’s to 20
Years!”*

***DTTA’s dance recital is a production of DTTA and not your child’s school. We encourage all children to participate in this valuable experience, but participation is not mandatory to take class.**



Phone: (954) 260-4409 / Email: DTTADance@gmail.com / Web: www.DanceTTA.com

PARENTS, PLEASE READ!

IMPORTANT RECITAL INFORMATION! MARK YOUR CALENDARS NOW!

If you have any questions, please let us know! Specifics will go home as we get closer to the show.

Dear Parents,

We are having a wonderful time dancing with your children every week and are already planning a spectacular show for our yearly recital. This is an event not to be missed! Below are all the details you need.

RECITAL FEE: \$265.00 -DUE BY JANUARY 31st

Everything your recital fee includes!

- ~ 1 costume/1 pair of tights (girls only)
- ~ 1 video download of complete show to view & share
- ~ 1 Gold Recital Picture Package with EPS Photography (includes sitting fee & purchase)
- ~ Participation in the dress rehearsal & show

*20% Sibling Discount / *50% Additional Dance Discount (if your child takes more than one class)

*Non –refundable after 1/31/2025 ~ no exceptions.

*Shoe/Hair requirements will go home in January. Shoes & tickets are not included in the recital fee.

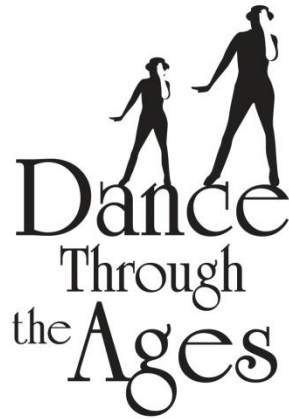
*We will be measuring all dancers during classes for costume sizing.

RECITAL LOCATION: *The Parker Playhouse, Ft. Lauderdale*

SHOW DAY: Sunday, May 25th @ The Parker Playhouse – Showtime 11:00 a.m.

PROFESSIONAL RECITAL PICTURE DAY: April 24th-April 27th @ DTTA –Schedule TBA

TICKETS SALES: On Sale Date TBA – Tickets sold through Ticketmaster



RECITAL PERMISSION FORM

Please fill out this form and return via **EMAIL** or **SEND** to us with your recital fee by **1/31/2025**. We cannot accept payments left at your child's school. Payment must be made to us directly!
By Email: Send us your signed permission form and you will receive a PayPal invoice to make your recital payment. *PayPal/Credit cards subject to fees* DTTADance@gmail.com
By Mail: Payment can be made by check or money order, made payable & sent to:
 Dance Through the Ages ~ 351 SW 136th Avenue, #104 ~ Davie, FL 33325

Dancer's Name: _____ Age: _____

Dancing Location: Brauser Maimonides Academy

**Please specify which class(es) your child attends:* _____

Parent(s) Name(s): _____

Contact Phone: _____

Email: _____

Please read and sign below: "I have read and understand all the information pertaining to the recital"
 I understand that the recital fee is **non-refundable** after January 31, 2025- no exceptions!
 I understand that the show may be converted to an in-studio performance, based on the current public health environment, and I may not be able to attend in person, but will be able to view it virtually.
 I understand that I am responsible for ticket purchase in order to attend the shows-whether in person or virtual.
 I understand that the recital fee includes 1 costume, 1 pair of tights, video, 1 Gold picture package per dancer I am registering & participation. I understand that there are 2 shows, and if I have more than one child, they may be in different shows depending on their classes. I am responsible for ticket purchase to all shows my family and I attend. Ticket pricing TBA (approx. \$40-\$50). Tickets are through Ticketmaster(fees apply). I understand tickets are not included in the recital fee and must be purchased to attend/view the show(s). I understand shoes are not included in the recital fee and I will be responsible for purchasing them for my child. I understand that all outstanding balances must be paid in full for my child to receive their costume & participate in the show and all show activities. I understand that costumes are not made to fit like regular clothing and may require minor alterations- they can only be returned if there is a defect. Returns for any other reason will incur a shipping fee, which I will be responsible for. I understand that my child must attend their dance classes & dress rehearsal in order to participate in the show. I understand that I am responsible for reading all emails and information that is sent to me regarding the show. I understand that both my child and my family must follow all safety protocols & policies DTTA & Parker Playhouse have in place in order to attend the show.

 Parent Signature

 Date