Above The Clouds 2432 N. Teutonia Ave. Condo #2 Milwaukee, WI 53206





"For as the heavens are higher than the earth so are my ways higher than your ways..." Isaiah 55:9

2022 FREE FALL Classes

Classes run from September 12 – December 9, 2022 There are no classes the week of November 21st!

Greater Life Community Center (2432 N. Teutonia Ave Condo #2)					
Beginner Ballet	Mondays	5:40-6:20pm	Ages 5-8		
Ballet Level 1	Mondays	4:30-5:30pm			
Ballet Level 3/4	Mondays	5:40-6:40pm			
Martial Arts	Mondays	4:30-5:30pm	Ages 9-13		
Modern Level 1/2	Mondays	6:30-7:30pm	Ages 9-17		
Ballet Level 5/6	Tuesdays	5:00-6:15pm			
	Thursdays	4:30-5:45pm			
Ballet Level 7/8	Tuesdays	6:00-7:30pm			
	Thursdays	6:00-7:15pm			
Piano	Tuesdays	5:30-6:15pm	Ages 5-8		
Piano	Thursdays	5:30-6:30pm	Ages 9-17		
Poetry	Thursdays	4:15-5:15pm	Ages 12-17		
Contemporary	Thursdays	4:30-5:30pm	Ages 10-15		
Нір Нор	Thursdays	5:45-6:45pm	Ages 9-13		

^{*} Ballet Level 3-8 students at this site will have a \$15 leotard rental fee!

Eastbrook Academy (5375 N. Green Bay Rd.)

Beginner Ballet Tuesdays 4:00-4:45pm Ages 5-8 Ballet Level 2 Tuesdays 5:00-6:00pm

Riley Montessori School (2424 S 4th St,) Classes begin Sept 19th**

** No classes October 24th

Beginner Ballet Mondays 4:00-4:45pm Ages 5-8

Mount Calvary (2862 N 53rd St.) Classes begin Sept 27th**

Hip Hop Tuesdays 4:30-5:30 Age 5-8 Martial Arts Thursdays 5:00-6:00pm Ages 8-11

Hope Street (2510 W Capitol Dr.)

Hip Hop Mondays 5:00-6:00pm Ages 13-17

Class Descriptions

Beginning Ballet: Learn fundamental skills of ballet which provide the foundation for learning any style of dance. (For new students or no experience. MUST be 5 BEFORE September 12th!) For New Students who are 9+ years of age please contact the office for placement.

Ballet Levels 1-8: For students with previous training in ballet at Above The Clouds or other dance studios. Students are placed according to skill level and ability. Ballet Level 7+ will train en pointe.

<u>Drama</u>: Students learn voice projection, use of body as well as develop & build confidence in their presentational skills.

<u>Hip Hop</u>: Hip hop is much more than a way of moving to <u>hip hop music</u>...it is a way of life. Students will learn that Hip hop is a lifestyle that includes its own language, music, and style of dance.

<u>Martial Arts:</u> This is a continuing program in Tae kwon do where students learn respect, discipline, safety, integrity, and self-confidence with Christ at the center. There are opportunities for promotion to different levels.

Modern Level 1/2: Students will progress fundamentals of Modern Dance, progressing in flexibility, strength, fluidity and clarity of movement.

<u>Piano:</u> Making music fun and easy to learn. This class is for students that have no or little piano experience.

Poetry: This class uses spoken word poetry to teach students the importance of being confident in your own voice. The class also provides students with tools to not only perform poetry but to understand their own stories and communicate concepts and emotions in an engaging and artistic manner.

<u>Contemporary:</u> This class is a blend of multiple dance techniques to develop creativity in movement.

❖ <u>Our Mission:</u> To provide free, faith-based, arts education and training to young people, ages 5-17, who lack fine arts exposure and access.

2022 FALL REGISTRATION FORM

SECTION I ~ REGISTRANT INFORMATION		
Child's First Name:		
Child's Last Name:		
Address:		
City: Zip:		
Date of Birth Age		
Gender: ☐ Male ☐ Female		
Grade in School:		
Name of School:		
City Where School is Located:		
Ethnicity: ☐ African American ☐ Asian ☐ Caucasian ☐ Hispanic ☐ Hmong ☐ Other (please list):	_	
Any health conditions or medications that may limit activities? ☐ Yes ☐ No If "Yes" please list below:		

SECTION II ~ PARENT/GUARDIAN INFORMATION			
Primary Parent/Guardian First & Last Name:			
Home Phone () Cell Phone ()			
List Cell Phone Carrier (If you would like text alerts in addition to emails):			
Email Address:			
Secondary Parent/Guardian First & Last Name:			
Home Phone () Cell Phone ()			
List Cell Phone Carrier (If you would like text alerts in addition to email):			
Email Address:			
Emergency Contact (if Primary or Secondary listed above are not reachable) First & Last Name:			
Relationship to child:			
Phone Number ()			

PLEASE FLIP OVER TO THE OTHER SIDE ------→

SECTION III ~ CLASS INFORMATION					
1 st time taking Above The Clouds Classes? ☐ Yes ☐ No If yes, how (internet, friend??)					
List Name, Day, and Location of Each Class of Interest Below:					
Class:	Day	Location			
Class:	Day	Location			
Class:	Day	Location			
Above The Clouds thrives on parents volunteering throughout each semester. There are many ways to help and those that do will be given first opportunity for special events as they arise. If you choose not to volunteer it does not mean that you will never be able to participate in any of the special events, however it will be offered only if there is still availability after volunteers have been given the opportunity. We are also looking to organize a volunteer committee. Please let us know if you are interested or not by checking the appropriate boxes below: □ I wish to volunteer this semester □ I DO NOT wish to volunteer committee □ I DO NOT wish to be a part of the volunteer committee					



Mail completed form to: Above The Clouds 2432 N. Teutonia Ave, Condo #2 Milwaukee, WI 53206

You can also email completed form to:

ATCMilwaukeeInfo@gmail.com

SECTION V ~ CONSENT		

During the course of the program of Above The Clouds (ATC), we from time video and still photos to be used for promotional, instructional, public relatio media, or any other purposed allowed by the law. Participants will not be no footage will be used. Also, there is no compensation to be paid for any of th used by ATC. I consent to the use of video and still photography. I DO NOT consent to the use of video and still photography. I hereby RELEASE and DISCHARGE: Above The Clouds, Eastbrook Acade Community Center, Riley Montessori School, Mount Calvary, and Hope Streliability, claims, demands or causes of action that registrant/you/family mem injuries and damages arising out of the activities, or information herein arisin class(es). There are no medical or physical conditions that might prohibit my participating in any ATC classes or would be against doctor's recommendat limitations have been listed in Section I of this form. I also understand that n may be taken out of any class(es) without prior notice if found to be endang indicating acts of violence to other participants, instructors, or to any site list By signing this agreement, I acknowledge the contagious nature of COVID-assume the risk that my child(ren) and I may be exposed to or infected by C attending classes and that such exposure or infection may result in persona permanent disability, and death. I understand that the risk of becoming expc COVID-19 at the classes may result from the actions, omissions, or neglige others, including, but not limitied to, ATC employees, volunteers, and progra their families. I voluntarily agree to assume all of the foregoing risks and act responsibility for any injury to my child(ren) or myself (including, but not limitinjury, disability, and death), illness, damage, loss, claim, liability, or expens or my child(ren) may experience or incur in connection with my child(ren)'s a classes. On my behalf, and on behalf of my children, I hereby release, cove discharge, and hold harmless Above The Clouds, its employees	n materials, social offied a head of time if e photos or videos emy, Greater Life eet from any and all obers may have for any out of the above y child from ion and any my child or myself ering, threatening, or ted above. 19 and voluntarily COVID-19 by all injury, illness, osed to or infected by nice of myself and am participants and cept sole ted to, personal ee, of any kind, that I eattendance at the enant not to sue, and representatives, of so or expenses of any se includes any se, its employees, during, or after ed a mandatory ey MUST wear the The Clouds. If my child information on this
Signature (Parent/Guardian if under 18)	Date