

ATHLETIC DANCE INSTITUTE

FALL 2026-2027 SCHEDULE

VISIT US ONLINE www.adidancenj.com

MONDAY

4:30-5:15 Beginner Tap (ages 7+)	TEAM CLASSES	4:45-5:30 Pom Squad (ages 9-12)
5:15-6:00 Adv. Beg. Tap	5:30-6:15 Pom Squad (ages 6-8)	5:30-6:15 Hip Hop Squad (ages 9-12)
6:00-6:45 Intermediate Tap	TEAM CLASSES	6:15-7:00 Jazz/Contemporary (ages 9-12)
6:45-7:30 Advanced Tap	TEAM CLASSES	
7:30-8:15 Adv. Beg/Intermediate Gymnastics	TEAM CLASSES	
8:15-9:00 Intermediate 2 Gymnastics		

TUESDAY

4:30-5:15 Pre School (ages 3-4)	4:30-5:15 Tiny Tots (ages 3-4)	4:30-5:15 Jazz/Gym (ages 6-8)
5:15-6:00 Kinderdance (ages 5-6)	TEAM CLASSES	5:15-6:00 Ballet/Gym (ages 5-7)
6:00-6:45 Hip Hop/Gym (ages 6-8)	TEAM CLASSES	TEAM CLASSES
6:45-7:30 Intermediate Gymnastics	TEAM CLASSES	TEAM CLASSES
7:30-8:15 Hip Hop (ages 13+)		
8:15-9:00 Jazz (ages 13+)		

WEDNESDAY

4:30-5:15 Jazz/Hip Hop (ages 5-8)	4:30-5:15 Tiny Team (ages 5-7)	4:30-5:15 Jazz/Gym (ages 6-8)
5:15-6:00 Ballet/Tap/Gym (ages 5-7)	5:30-6:15 Hip Hop (Ages 10-14)	5:15-6:00 Beginner Gymnastics/Tiny Team
6:15-7:15 Jazz Technique (ages 10-14)	6:30-7:15 Pom Squad (ages 10-14)	6:15-7:30 Adv. Beg/Intermediate Gymnastics
7:15-8:00 Ballet/Contemporary (ages 10-14)	7:30-8:30 Advanced Gymnastics	

THURSDAY

4:30-5:30 TEAM Ballet	TEAM CLASSES	4:30-5:15 Ballet/Gym (ages 4-6)
5:30-6:30 TEAM Ballet	TEAM CLASSES	
6:30-7:30 TEAM Ballet	TEAM CLASSES	6:30-7:30 Intermediate Gymnastics
7:30-8:30 Musical Theater (ages 11+)	TEAM CLASSES	TEAM CLASSES
8:30-9:00 Audition Prep	9:00-9:30 Open Skills	

FRIDAY

4:45-5:45 All-Star Technique	4:45-5:45 All-Star Technique
5:45-7:30 All Star Rehearsal	5:45-7:30 All Star Rehearsal

SATURDAY


10:00-10:45 Preschool (ages 3-4)
10:45-11:30 Cheer/Gym (ages 5-8)

If you do not see a class day or time that works for your child, please let us know. We will do our best to add an additional class to the schedule if possible. A minimum of 5 students is required to open a new class.

All Team classes are by invitation/evaluation only
All Gymnastics & Tap classes are by evaluation only.

We strongly believe that by dividing our tap and gymnastics programs by ability, rather than age alone will benefit your child's strength and progression. This curriculum is in place to ensure the safety while learning the sport of tap and gymnastics.

CONTACT US:

 : (848) 209-9698

 : athleticdanceinstitute@gmail.com

 : @adidancenj



TUITION AND PAYMENT SCHEDULE FOR 2026-2027

Tuition is based on 31–33 classes per dance year, running from September 2026 through June 2027. Tuition is not determined by the number of classes in each individual month. For your convenience, tuition is divided into 10 equal monthly installment payments.

Tuition payments may be made by cash, check, debit card, or credit card. A valid credit card is required to remain on file for all accounts. Tuition installment payments are due on the 15th of each month for the upcoming month (for example, October tuition is due by September 15th). Unless payment has already been received, the credit card on file will automatically be charged on the due date. Please note that tuition remains due by the 15th even if the date falls during a holiday closure.

A \$10 late fee will be applied to any payment received after the due date. Any account with an unpaid balance exceeding 30 days may result in the student being unable to participate in classes until the balance is paid in full. A \$35 fee will be charged for all returned checks. Please note that invoices will only be sent if an account becomes delinquent.

Missed classes may be made up during the dance year; however, no refunds or credits will be issued for missed classes. **ATHLETIC DANCE INSTITUTE RESERVES THE RIGHT TO CANCEL CLASSES DUE TO LOW ENROLLMENT.**

An Early Bird Tuition Special is available for returning students. Register and pay your first month’s tuition by Tuesday, June 16th to receive \$10 off your first month’s tuition plus FREE registration (a \$35 value).

Tuition is based on each 45-minute class and is as follows:

1 Class	\$70.00	TUITION AMT
2nd Class	+\$65.00	(\$135)
3rd Class	+\$60.00	(\$195)
4th Class	+\$55.00	(\$250)
5th Class	+\$50.00	(\$300)
6th Class	+\$50.00	(\$350)

Each Student will max out at 7 classes for \$355.00

Family Discounts are offered at 30% off each additional student after 3 classes for the first student. For example: **1st Family member** taking 3 classes pays \$195. Sibling would then pay 30% off the total of their class(es): **2nd Family member** taking 1 class is \$70 - 30% = \$49 - Family total tuition would be \$244.00

Families will max out if both members take 6 or more classes at \$475.00

Payment Schedule

- Tuition Payment #1- Due upon Registration
- Tuition Payment #2- Due September 15, 2026
- Tuition Payment #3- Due October 15, 2026
- Tuition Payment #4- Due November 15, 2026
- Tuition Payment #5- Due December 15, 2026
- Tuition Payment #6- Due January 15, 2027
- Tuition Payment #7- Due February 15, 2027
- Tuition Payment #8- Due March 15, 2027
- Tuition Payment #9- Due April 15, 2027
- Tuition Payment #10- Due May 15, 2027

**ATHLETIC DANCE INSTITUTE HAS THE RIGHT TO CANCEL CLASSES WITH LESS THAN 5 STUDENTS ENROLLED.
ATHLETIC DANCE INSTITUTE HAS A \$35.00 REGISTRATION FEE PER FAMILY.
ATHLETIC DANCE INSTITUTE HAS A NO REFUND POLICY.**



FALL 2026-2027 REGISTRATION FORM

Dancer's First Name: _____ Last Name: _____

Date of Birth: _____ Age (as of 9/14/26): _____

Home Address: (Street): _____

(City): _____ (State): _____ (Zip): _____

Mother's Name: _____ Phone Number: _____

Father's Name: _____ Phone Number: _____

E-Mail: _____ (please print clearly)

Alternate Phone Number: _____ Name of Alt. Phone #: _____

Emergency Contact:

Name: _____ Phone #: _____

New Students Only

Please List Previous Experience: _____

How were you referred to ADI?: _____

CLASS(ES) TITLE	DAY/TIME

Total number of classes registered: _____ Tuition Amount: \$ _____

Form of Payment: Cash _____ Check #: _____ Venmo: _____ Credit Card: _____



Student Medical History & Waiver

- Please List any previous injuries, allergies, handicaps, or disabilities. It is important for our staff to be prepared and aware of any hindrance to your child's performance in class:

- I agree to provide medical insurance for the above named student and will not hold Athletic Dance Institute, its agents or employees liable in the event of any accident or injury. If I am not reached in an emergency, I give permission to the staff to render or act on my behalf to obtain emergency medical treatment for this student for any illness or injury that may occur while attending Athletic Dance Institute.
- I certify the above named student is emotionally and physically ready, in good health and is given my permission to participate in a dance or gymnastics class. I fully understand that there is some risk in dance and dance related activities and I am willing to assume those risks.
- I understand that this waiver means I give up my right to bring any claims including for illness, personal injuries or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

CHOICE OF LAW: I understand and agree that the law of the State of New Jersey will apply to this contract.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:

Student Full Name: _____ Date: _____

Parent/Guardian Full Name: _____

Parent/Guardian Signature: _____

Photo/Media Release:

Dancers of Athletic Dance Institute may have the opportunity to be photographed or videotaped at various dance events or while in class. With permission from parent/guardian these photos or videos may be used in Athletic Dance Institute publications or advertisements, including on our website and various social media sites. To ensure privacy, specific names of children will not be included. No financial compensation shall be given for use of any photographs or video. I acknowledge that Athletic Dance Institute may choose not to use my photo or video at this time, but may do so at its discretion at a later date. Athletic Dance Institute reserves the right to discontinue use of photos or videos without notice.

I have read this release and I understand its contents. I consent to and authorize the use by Athletic Dance Institute, or anyone authorized by Athletic Dance Institute, of any and all photographs or videos which have been taken of my child/children.

I agree to the above Photo/Media Release _____

I do not give Athletic Dance permission to use photos of videos of my child at this time _____