

# Does Your Child Love to Sing?



Then they'll *love* our Singing Workshops!

**Location: El Rincon Elementary**

## Spring 2017 Workshops:

*Kids Movie Tunes II* (Grades K-2)

Thursdays, April 13<sup>th</sup> – June 1<sup>st</sup>

*Kids Movie Tunes II* (Grades 3-5)

Mondays, April 10<sup>th</sup> – May 22<sup>nd</sup> (combined performance on Thursday, June 1<sup>st</sup>)

**Kids will learn popular songs from their favorite children's movies. Musical activities include: Singing Games • Vocal Fun-da-mentals • Rhythm and Movement • Connecting with Song Lyrics • Performance Techniques. There will be a final performance for family and friends starring *your* child!**

**\*\* Your child can attend the Kids Movie Tunes workshops in *any* order!\*\***

**Time: 3:15 pm – 4:30 pm**

**Session Length: 8 Weeks**

**Cost: \$120**

**Register Online: [www.singingkids.com](http://www.singingkids.com)**

(or turn in registration form below to the main office with payment)

**Register early to reserve your spot!**

**SingingKids.com**

*As advertised on Radio Disney*

**(310) 737-9387**

*Music develops confidence, engages analytical and intuitive thinking, and fosters creativity, preparing children to develop creative solutions in learning and in life.*

### Enrollment/Permission Form:

I give my child permission to participate in the Kids Movie Tunes II singing workshop at El Rincon Elementary.

Over the course of the workshop, Vocal Stylings may photograph or videotape the classes with our students.

Your signature below will serve as your permission for your child to be photographed and/or videotaped, and possibly featured in our promotional materials or on our SingingKids.com website.

Check the session you're enrolling in: Grades K-2 (4/13-6/1) \_\_\_\_\_ Grades 3-5 (4/10-5/22; 6/1) \_\_\_\_\_

Child's name: \_\_\_\_\_ Grade: \_\_\_\_\_ Room: \_\_\_\_\_ Teacher: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ How will your child get home after class? \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Emergency Name/Phone #: \_\_\_\_\_

*Please make checks payable to Vocal Stylings, and turn in to the main office with this form.*

