KO Strutter Dance Study & Community Service Hours

Name: _____

DANCE STUDY HOURS (21 Total Hours / 9 Ballet)					
Studio Name	*Instructor's Name*	*Class Description (Ballet, Leaps, Turns, etc.)*	*Date*	*Hours*	*Signature*
		Ballet			
		Ballet			
		Ballet			
		Ballet			
		Ballet			
		Ballet			
		Ballet			
		Ballet			
		Ballet			

KO Strutter Dance Study & Community Service Hours

Name: _____

COMMUNITY SERVICE HOURS (30 Total Hours)					
Location	*Supervisor's Name & Email Addr*	*Description of Service*	*Date*	*Hours*	*Signature*