

*InnerMotion,  
Dance and Movement*

Using therapeutic dance and movements, InnerMotion classes are designed to improve self esteem, assist with balance and coordination, improve cognitive deficits, and increase range of motion. Our students find this program to be a way to relax, escape from their pain and emotional difficulties, and express their inner feelings.

Register Today!

**InMotion  
Dance Academy**

989.835.3744

Kathy@inmotiondanceacademy.com

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P.O. Box 2475  
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*InnerMotion*

*A Dance  
and  
Movement  
Program*

InnerMotion, *Dance and Movement*, is a program based on the premises that the mind and body are interrelated.

Through the use of therapeutic movement, the individual furthers their social, cognitive, emotional, and physical development. This class is designed for those diagnosed with:

- ◇ Traumatic Brain Injury
- ◇ Mental/Physical Impairments
- ◇ Wheel Chair Restricted
- ◇ Quadriplegics
- ◇ Seniors
- ◇ Dementia
- ◇ Alzheimer
- ◇ Sexual Assault Victims
- ◇ Chemical Dependency
- ◇ Anyone!

InnerMotion, *Dance and Movement*, strives to positively influence the physical, mental, and emotional well-being of the client through the movement of dance. The emphasis of this class is on free movement, improvement in range of motion, stress reduction, and of course, fun and enjoyment for all.

**About The Founder**

InMotion Dance Academy is owned and operated by Katherine Gracer. Katherine is a Social Worker and a Certified Lebed Method Instructor. Her combination of Social Work and Dance provides a unique and beneficial opportunity to correlate between the cognitive and physical needs of the client.

**Registration Form**

**Participant Information**

Name: \_\_\_\_\_

Current Residence: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Insurance Provider (If Applicable): \_\_\_\_\_

Policy Number (If Applicable): \_\_\_\_\_

\_\_\_\_\_

**Guardian Information**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_