AWDT Jr. Generals Dance Clinic
DANCING THROUGH THE SNOW

Grades K-8 are all welcome to attend!

Dancers will learn dance technique and a dance routine to perform at the varsity basketball game on Dec. 3rd. Dancers should wear athletic clothing, tennis shoes, & bring a water bottle with their name.

CLINIC DATES:
12/2/2021: 5:00-7:00 at Fallen Timbers Middle School
12/3/2021: 5:00-6:15 at Fallen Timbers Middle School
Perform at Varsity BB game following clinic @ 7:00

COST: $45 per child by November 28 online or $50 as walk-in registration.
Cost includes: Shirt, Santa Hat, Clinic & Admission to BB game with paid adult.

LINK FOR SINGUP:
Registrations is preferred online, but you may fill out this form, and turn it in at the first clinic practice. Computers will be available to make payment online at the first day of the clinic.
If you have any questions, you can email: jpfefferle@anthonywayneschools.org

Attention parents: If interested, bring cash to the first day of the clinic to purchase gently used studio costumes in all sizes. These costumes can be great for dress up, plays at home or dance costumes. Varsity dance parents will be selling them in the FT cafeteria for $5-$15 a piece.

Meal at Game: Anthony Wayne Dance Team will be serving a meal at the basketball game on Friday, December 3rd. After the practice on the 3rd, dancers and families should head to the HS for the performance at the varsity game. We would love it if you would support our program by purchasing a meal or meals for your family. Meals will be $5.00 per person.

Child's Name: _____ Grade in 2021-2022: _____

Parent/Guardian's Name: _____Phone Number: _____

Shirt Size (Circle):   YS   YM   YL   AS   AM   AL

(Child)_____ has my permission to take part in the Anthony Wayne Dance Team Junior Clinic. I, (Parent/Guardian)_____, hereby waive and release Anthony Wayne Local Schools and its staff and coaches from any and all responsibility for injury or illness that may occur. I hereby claim my child physically able to participate in the Anthony Wayne Dance Team Junior Clinic.

Parent Signature:_____ Date:_____