

**New Date!**

# Armstrong High School Dance Team Fall Kids' Dance Clinic and Performance

Friday September 13th, 2019

4:30-6:30 p.m. dance instruction at Armstrong High School

6:30-7 Pizza dinner with team

7 p.m. AHS Varsity Football Game half time performance (about 7:45)

- ❖ Calling all kids entering 1st – 8<sup>th</sup> Grade! Come be part of the AHS Dance Team!
- ❖ For only \$35.00 your child will get dance team instruction, a t-shirt, dinner (pizza/water) with team before the game and entrance into the football game!
- ❖ Pick up after half time performance is on visitors' sideline of the field, near the entrance.
- ❖ No dance experience necessary. Wear comfortable clothing, tennis shoes and hair in a high pony.

### Register by September 5th, 2019.

Send a \$35 check payable to ADT Fall Boosters and your completed signed registration form (one per child) to: Laurie Kushnir, 2809 Aquila Ave N., New Hope, MN 55427. Online registration at [bit.ly/2019kidsclinic](http://bit.ly/2019kidsclinic)

Questions? Laurie Kushnir at [Adtfallboosters@gmail.com](mailto:Adtfallboosters@gmail.com) or cell at 612-720-3866.

Child's name: \_\_\_\_\_

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

Parent name: \_\_\_\_\_

Parent email: \_\_\_\_\_

Emergency name and phone: \_\_\_\_\_

Current grade (circle one):            1 2 3 4 5 6 7 8 School \_\_\_\_\_

T-Shirt size (circle one):            Youth: S (6-8) M (10-12) L (14-16) Adult: S M L XL

Waiver and Indemnity Agreement: Acceptance of my entry in this clinic is without responsibility of any kind by Robbinsdale Armstrong High School Dance Team Booster Club, Robbinsdale Armstrong Dance Team members, School District 281, and any other entity sponsoring event. I do hereby for and on behalf and my heirs and legal representatives release and forever discharge Robbinsdale Armstrong High School, Robbinsdale Armstrong Dance Team Boosters, Robbinsdale Armstrong Dance Team, ISD 281, their offices and representatives from any and all claims, demands and injuries, howsoever arising whether caused by the negligent or intentional acts of RAHSDTBC, RAHSDT, ISD 281, the sponsoring body or the representative. I have read and understand the foregoing release and indemnity agreement. I sign this on behalf of my child, the registrant.

Parent Signature: \_\_\_\_\_



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