



Annual JUNIOR DANCE CLINIC

**Hosted by: The Weatherford Blue Belles
Dance Team
on
Monday, January 21, 2008**

The clinic is for WISD students, ages kindergarten through 12th grade.
The day's events will be as follows:

- | | |
|-------------|---|
| 8:30-9:00 | Registration at WHS Gym Foyer |
| 9:00-9:30 | Stretching/Dance Fundamentals |
| 9:30-11:30 | Learn Performance Dance (all ages)
<i>(Dance opportunity will be the next day, January 22nd,
At the Kangaroo Varsity Basketball Games)</i> |
| 11:30-12:00 | Sandwich Lunch Provided |
| 12:00-1:15 | Specialty classes in Jazz/Hip-Hop/Pom
<i>(Beginner, Intermediate and Advanced levels offered)</i> |
| 1:15-2:00 | Review of all dances learned |
| 2:00-2:30 | <i>Show-offs for parents & friends
Awards & Dismissal</i> |

Cost for the Clinic is \$30.00 including dance instruction, lunch certificate,
T-shirt and optional performance opportunity.

For more information call Nika Carter @ 817-598-2872, email
ncarter@weatherfordisd.com or www.weatherfordbluebelles.com

Entry forms are available at all WISD campuses in the main office. You can
mail in your entry form to WHS or register at the door on the day of the
clinic.

SEE YOU THERE!

The WHS BLUE BELLES *present their annual*
JUNIOR DANCE CLINIC
Monday, January 21, 2008

Where: WHS Gyms – 2121 Bethel Rd.

Times: 8:30 a.m. - 9:00 a.m. Registration
9:00 a.m. - 2:00 p.m. Clinic
2:00 p.m. - 2:30 p.m. Show-offs for parents/ friends

Cost: \$30 – Clinic

Includes: (Dance Instruction, lunch, certificate, optional performance, & T-shirt)

Wear: Comfortable clothing such as shorts, sweats,
T- shirts and tennis shoes. Bring water bottle.

Registration: Fill out the form below, return to a Blue
Belle/Director or mail to:
WHS Blue Belles, 2121 Bethel Rd, Weatherford, Tx 76087

(You may also register at the door on Saturday!!!!)

Name: _____ Age: _____

Address: _____ Phone#: _____ Cell # _____

City/State/Zip: _____ Grade: _____

Parent/Guardian Name: _____

I _____, hereby release WHS and the WHS Blue Belles of any
liability in case of injury to my child, _____, while attending
the Junior Dance Clinic on Monday, January 21, 2008.

Parent Signature _____

I have enclosed: \$30 for clinic/t-shirt

T-shirt Size: YS YM YL AS AM AL AXL (Please circle a size)

See the back for performance opportunity!

Optional Performance

In addition to the dance clinic on January 21, 2008, the WHS Blue Belles would like to offer the Jr. Dancers a performance opportunity.

On **Tuesday, January 22, 2008**, the Jr. Dance Team will join the Blue Belles during the break between the Roos and Lady Roos Varsity Basketball Games to perform.

If you are interested in performing, please fill out the below form and return it to a Blue Belle, a Blue Belle parent, or Mrs. Carter/Ms. Smith. Game starts at 6:00 p.m. Performance is at approximately 7:30 p.m.

On **Tuesday, January 22, 2008**, the dancers will need to be at the WHS gym at 6:00 p.m. to practice their routine before the performance. **In addition to the T-shirt, the dancers need to wear blue jeans and tennis shoes.** T-shirts will be handed out at the practice.

Dancers get in free w/ Registration. Spectators must purchase a ticket to the game.

After the dancers have performed, they will be free to leave with parents or are invited to watch the basketball game.

< ONLY PERFORMERS GET IN FREE >

Name of Dancer: _____

YES! I want my child to perform at the break between the Roos and Lady Roos Varsity Basketball Games on Tuesday, January 22, 2008, with the Blue Belles.

Parent Signature