EIU Pink Panthers *Dance Skills Clinic*

The Eastern Illinois University Pink Panthers would like to invite you to attend their annual dance skills clinic. The sessions are open to any student in grades Grade 4-9 interested in learning and/or improving their dance skills. Each session will offer warm up/stretch, turns, leaps, jumps, kicks-splits, and hip-hop skills necessary for middle and high school team tryouts. Sessions will be 4:30-6pm in the McAfee North Gym.

#1: March 22 #2: March 24 #3: March 29 #4: March 31
#5: April 5 #6: April 6

Clinic Session: Parents/guardians please accompany your child to the gym and have your child wear comfortable shoes and clothing such as, tennis shoes, jazz/hip-hop shoes, stretch/jogging pants, leotard, and t-shirt.
During the clinic: Parents/guardians may wait for their child during the clinic in the McAfee bleacher seating. ***No adults are allowed on the McAfee gym*** floor during sessions. The Pink Panthers will supervise your child during the dance clinic. **The Athletic Department, EIU, and Pink Panthers will NOT be held responsible for any injury, accident, or lost apparel** during the clinic.
After the clinic: Please promptly pick up your child from gym. No child will be able to leave unless accompanied by the indicated appropriate parent/guardian on the form. The Pink Panthers, Athletic Department, and EIU will not be responsible for your child after the designated clinic pick-up times.

Please make checks Payable To: EIU Pink Panthers
Before March 21st--FEE: $15.00/session per child or $65.00/child for 6 sessions
After March 23rd-- FEE $20/session per child
COMPLETE & MAIL FORM & CHECK to:
Lisa Dallas, EIU Pink Panther Dance Team Coach, 600 Lincoln Ave, Charleston, IL 61920

--- KEEP ABOVE INFORMATION FOR CRITICAL CLINIC INFORMATION---

PLEASE NEATLY PRINT *all information*
& RETURN ONLY this portion of the form with payment

Childs Name _____ **SESSION #s:**_____
Last First Middle Init
Age ____ **Grade in school**_____ **School Name**_____
Parent/Guardian Names _____ **Ph#**_____
Address_____ **Cell#**_____
Person picking up child _____
Emergency Contact if parent unavailable_____ **Relationship to child** _____
EC Cell/Phone#_____
Insurance carrier _____ **Insurance Card #**_____
Doctor_____ **Ph#**_____

GO PANTHERS!