

RDC Mini Dance Co. Camp

March 21-23rd, 2017

Come and learn technique and choreography from the Riverton High School Dance Company. Each group will perform on stage with RDC for their Spring Concert Pre-view on March 23rd!

Clinics March 21-22:

Grades Pre-K-K: 6:30-8:00pm (Hip Hop) in tech Atrium

Grades 1-3: 6:30-8:00pm (Lyrical) in the small gym

Grades 4-6: 6:30-8:00pm (Jazz) in the auditorium

Grades 7-9: 6:30-8:30pm (Contemporary and Hip Hop) in the dance room

Performance Mach 23rd:

Dancers arrive at 6:00pm, Show begins at 6:30pm

COST

\$25-includes a T-shirt and 2 tickets to the showcase

REGISTRATION BY MAIL, IN THE MAIN OFFICE OR AT THE SCHOOL THE FIRST NIGHT 6-6:30PM

T-Shirt Size (circle one) Yth Small Yth Med Yth Lrg Adult Small Adult Med Adult Lrg

Checks will not be accepted. Cash or Card only please! Registration in person on Tuesday the 21st!

Registration can be done at:
Riverton High School Main Office
12476 S. 2700 W
Riverton, Utah 84065

For more information email:
Brynn Perkins
brynn.perkins@jordandistrict.org

Name of Participant: _____
Last First

Address: _____

City: _____ Zip Code: _____

Name of Parent or Guardian: _____ Email: _____

Cellphone Numbers: _____ (primary contact) _____ (secondary contact)

Birth Date: _____ Age: _____ Grade: _____

In case of Emergency, please notify (Name) _____ (Phone #) _____

PARENT STATEMENT OF AGREEMENT

ASSUMPTION OF RISK, LIABILITY RELEASE, INDEMNIFICATION AND REFUND POLICY

1. Release and Indemnification: I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events, I, for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive and discharge Riverton High School, and its officers and employees and volunteers from any and all suits, claims or liability, including negligence, based on any injury except that caused solely by the willful misconduct of Riverton High School activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my child's participation.
2. Refund Policy: All refunds must be requested in person, accompanied with a written refund request. No refunds shall be given after the first day of the program.
3. Collections: I agree to pay Riverton High School all costs incurred, together with reasonable attorney's fees in the events that my account is turned in for collection.
4. Emergency Treatment: I hereby authorize Riverton High School program staff to act on my behalf in accordance with their best judgement in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom. I understand that I or my insurance company will be billed for such emergency treatment.
5. By signing this assumption of risk, liability release, indemnification and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms.

Signature (Parent or Legal Guardian)

Date

