



City of Lapeer  
**PARKS and RECREATION DEPARTMENT**  
 880 S. Saginaw Street, Lapeer, MI 48446 810-664-4431  
**COMPETITIVE DANCE 2010**



Welcome to Intramural Competitive Dance! Dancers will be divided into teams with their friends and classmates. Dancers will learn small group choreography in preparation for competition. (All levels of dancers welcome.) Each team will learn one dance to perform in the intramural competition and a group dance to perform together with all of their competitors!



**Registration:** October 24th – November 11th  
**Grades:** 6th, 7th, & 8th  
**Dance Meeting:** Monday, November 21st  
**Season:** 12 weeks – omitting holidays.  
**Cost:** \$58



**Friend Request:** Dancers may list the names of friends they'd like to cheer with! Although we cannot guarantee that they'll be on the same dance team (depending on enrollment), every effort will be made to group them together!!

\*\*\* Refunds will only be issued until the team draw is completed and will be subject to a \$5 refund charge.

**VOLUNTEER ASSISTANT COACHES** are needed. Competitive Dance is fun.  
 All it takes is an interest in children!

City of Lapeer Parks and Recreation Department  
**COMPETITIVE DANCE 2010**

**MAKE A DIFFERENCE...**  
 We need your help! Please sign up at the bottom of this form to be a volunteer coach.

Fee: \$58 \_\_\_\_\_  
 Late fee \$5 \_\_\_\_\_

BOY \_\_\_\_\_ GIRL \_\_\_\_\_

Participant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Grade \_\_\_\_\_ Birthdate \_\_\_\_\_ School \_\_\_\_\_

**Child's Shirt Size (Circle One)    YS    YM    YL    AS    AM    AL    A-XL**

Friend request: 1. \_\_\_\_\_ 2. \_\_\_\_\_

**WAIVER/RELEASE OF LIABILITY**

I hereby give my permission for my son/daughter to participate in the City of Lapeer Parks and Recreation Competitive Dance Program; and I waive any or all rights to claims for damage arising from injury received while my child is participating. I hold harmless this Department, its' organizers, sponsors, managers, coaches, officials or supervisors appointed for any injuries incidental to the activities or transportation to and from these activities.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**WOULD YOU PLEASE HELP?**    Assistant Coach \_\_\_\_\_    Shirt Size \_\_\_\_\_

Name \_\_\_\_\_    Phone # (H) \_\_\_\_\_    (W) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

It is the policy of the City of Lapeer that all employees and volunteers, be subject to a criminal background check prior to service.

**REGISTER KEY – Rec. Misc.** Background Check

FEE \_\_\_\_\_ RECEIPT # \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Charge \_\_\_\_\_ Staff \_\_\_\_\_ Date \_\_\_\_\_ Info Given