

2011 Packatahna Dance Camp

The 21st annual summer Packatahna Dance Camp is open to both girls and boys in preschool and grades K-8. The camp will be held the week of June 13-16th at the **Lodeon Center in West Fargo 109 3rd St. E.** The camp is designed to teach the fundamental skills of kick, jazz, pom and hip hop, as well as develop an interest in dance as a sport. As an added bonus, there will be a short recital held on the last day of camp (**THURS**) **at 11:30** for parents and other community members to view. The camp will be directed by Packatahna coaches, Jordan Jost and Kallista Nilson, and assisted by the 2011-12 team members. The camp fee includes a dance t-shirt and participation awards for all dancers. Grades 4-8 will also receive special awards in each class at the end of camp.

****Please note the time/location change for the camp this year.****

AGE/GRADE <i>NEXT YEAR</i>	TIME	FEE
*Preschool-Must be 4yrs old(Limit 15/class)	11-11:30 or 11:30-12:00	\$25
*Kindergarten (Limit 25)	11-12:00	\$35
*1 st and 2 nd grade (Limit 25)	11-12:00	\$35
3 rd -6 th Grade	9-11:00	\$45
7-8th Grade	9-12:00	\$48

****Register early for classes with limits as they fill fast and we cannot go beyond limits.**

There will be a \$5 late fee for any registrations received after JUNE 1st.*

****FEES ARE NON-REFUNDABLE****

For more information contact: Gretchen Stafslie at gstafslie@west-fargo.k12.nd.us

Or Jordan Jost at packatahna@yahoo.com

Clip and send this registration form by **JUNE 1st** along with your check or money order to: **Packatahna 801 9th St. E West Fargo, ND 58078.** Anyone registering after June 1st will be charged a \$5.00 late fee.

Camper's Name _____

Age: _____ Class entering *Next Year*: _____

Preschoolers specify time 11:00-11:30 or 11:30-12:00

Address: _____

Parent/Guardian Name: _____

Parent E-mail address: _____

Contact Number week of camp: _____

CIRCLE T-SHIRT SIZE: Youth XS Youth S Youth M Youth L Adult S Adult M Adult L

I understand that the Packatahna do not supply medical insurance nor will the Packatahna be responsible for any medical expenses. I hereby authorize the instructors of the dance camp to act for my child to their best judgment if any emergency requiring medical treatment should occur. I waive and release the dance camp instructors from any and all liability of any injury. I also verify that my child is medically fit to participate in this activity.

Parent/Guardian Signature _____ Date _____