

**THE AWARD WINNING
BERKNER BANDOLERA DANCE & DRILL TEAM
WILL BE CONDUCTING THEIR
ANNUAL DANCE WORKSHOP
SATURDAY, October 22, 2016**

FOR GIRLS IN THE *Kindergarten* THROUGH 12TH GRADES

PLACE: BERKNER HIGH SCHOOL, 1600 E. SPRING VALLEY ROAD, RICHARDSON
BIG GYM (EAST ENTRANCE, FACING YALE BLVD.)

TIME: 1:00 PM – 4:30 PM WITH PERFORMANCE BEGINNING AT 4:00 PM

COST: \$25.00 (NO REFUNDS GIVEN)

BRING: BOTTLE OF WATER (Snack & cold drink will be provided)

WEAR: TENNIS SHOES AND COMFORTABLE DANCE CLOTHES or ATHLETIC SHORTS



**GIRLS K- 6 WHO PARTICIPATE IN THE DANCE CLINIC ARE INVITED TO PERFORM AT THE PREGAME
SHOW AT THE OCTOBER 28th BERKNER VS. RICHARDSON (DANCE CLINIC SHIRT REQUIRED TO PARTICIPATE).**

****PAID REGISTRATION RECEIVED BY *OCTOBER 8th* WILL RECEIVE A FREE BANDOLERA DANCE CLINIC T-SHIRT****

Girls must attend the clinic to receive a shirt.

- YOU MAY ALSO REGISTER AT THE DOOR
- A LIMITED NUMBER OF T-SHIRTS WILL BE AVAILABLE FOR PURCHASE AT THE DOOR
- HAVE YOUR PICTURE TAKEN WITH A BANDO FOR \$3
- VISIT THE BANDO SPIRIT SHOP
- SPECIAL PERFORMANCE BY THE BANDOS

FOR MORE INFORMATION OR QUESTIONS: Check our website www.berknerbandos.org
or contact Sarah Davis at bandodanceclinic@gmail.com



2016 Dance Clinic Sponsors

SCHEDULE:

Registration/Check-in	1:00 PM - 1:30 PM
Orientation & Learn Routine	1:30 PM - 3:30 PM
Break (snack provided)	3:30 PM - 3:45 PM
Polish Routine	3:45 PM - 4:00 PM
Performance of Routines	4:00 PM - 4:30 PM

**Parents welcome to videotape performances.*

Make checks payable to BERKNER BANDOLERA BACKERS CLUB (or BBBC).

\$25 Registration fee, add \$3 for picture with a Bandolera. NO REFUNDS GIVEN.

Mail Registration to: BERKNER BANDOLERA BACKERS CLUB, C/O Karissa Hernandez, P.O. Box 852046, Richardson, TX 75085-2046

ADDRESS: _____ **ZIP CODE:** _____

TELEPHONE: _____ **EMAIL:** _____

SCHOOL: _____ **GRADE:** _____ **AGE:** _____

T-SHIRT SIZE: Youth Small Youth Med. Youth Large Adult Small Adult Med. Adult Large

NAME:

I WILL NOT HOLD BERKNER HIGH SCHOOL, THE BERKNER BANDOLERAS OR THE BERKNER BANDOLERA BACKERS CLUB RESPONSIBLE IN CASE OF INJURY. **THIS BOX MUST BE CHECKED IN ORDER TO PARTICIPATE.**

THE BBBC AND THE BERKNER BANDOLERAS HAVE MY PERMISSION TO TAKE STILL PHOTOS AND VIDEO AT THIS EVENT, WHICH MAY BE DISPLAYED ON THEIR WEBSITE AND/OR USED FOR ADVERTISING OR OTHER PURPOSES. **THIS BOX MUST BE CHECKED IN ORDER TO PARTICIPATE.**

I WOULD LIKE TO RECEIVE EMAILS/MAILINGS ABOUT UPCOMING MEDICAL CITY EVENTS.

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

IN CASE OF EMERGENCY, NOTIFY (Print Name and Phone Number):

BANDO WHO GAVE YOU REGISTRATION FORM (Optional):