

# KIDS DANCE CLINIC 2025

## I WANNA PARTY

**Event Date - October 3rd / Registration Due - September 16th**



### Music from the Motion Picture - RIO

GET READY! It's time for the AHS DANCE TEAM KIDS CLINIC!  
Perform for sidelines before the game and at halftime of an AHS Varsity Football game!

**When:** Friday, October 3rd, 2025 (4:15pm - until Halftime ... sidelines approx... 6:30 pm. game starts at 7:00 with halftime performance approx. 7:25)

**Where:** Ashwaubenon High School OLD Commons by the Main Office / Small (Old) Gym

**Who:** Students grades 4K-5

**Cost:** \$50.00 - Includes dancing with pom-poms, a t-shirt, pizza, beverage, snack, & admission to game for the participant.

\*\*\***ONLY** the participants registered by September 16th will be guaranteed a T-Shirt as we need to order them by that date.\*\*\*

**Dress:** Participants are encouraged to wear leggings or comfy pants and tennis shoes. They will wear the **YELLOW** t-shirt provided to the performance on the football field. Feel free to accessorize with anything **ORANGE** / **BLUE** to fit the color scheme!



**Registration Due Date: Tuesday SEPTEMBER 16th (Guarantees a T-Shirt)**

Check in will begin at **4:15pm**. Participants will learn sideline dances and a halftime routine taught by the Varsity and Middle School Dance Teams. All proud parents/families are encouraged to purchase a game ticket and come watch the performance.

Please pick up your child in the SMALL (OLD) GYM after the halftime performance. They will receive a photo prior to leaving. **DON'T FORGET TO PICK IT UP**

INVITE ANY RELATIVES OR FRIENDS TO PARTICIPATE WITH YOUR CHILD AND EXPERIENCE THE FUN!

**\*Questions???** Contact Heidi Parsons: [Heidiparsons19@gmail.com](mailto:Heidiparsons19@gmail.com) or 920-265-7161

**\*Mail your \$50.00 check (payable to: Ashwaubenon High School) and completed form to:**

**Ashwaubenon High School / Attn: Dance Team / 2391 S Ridge Rd / Green Bay, WI 54304**

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Cut and send form below

AHS Dance Team Kids' Clinic (AHS, Attn: Dance Team, 2391 S Ridge Rd, Green Bay, WI 54304) (Please Print)

Participant(s):

Name \_\_\_\_\_  
Grade \_\_\_\_\_ School \_\_\_\_\_  
Sweatshirt size: Youth S / Youth M / Youth L / Youth XL / S / M / L / XL  
Food Allergies: \_\_\_\_\_  
Medical Concerns: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_  
Phone (in case of emergency) \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

Name: \_\_\_\_\_  
Grade \_\_\_\_\_ School \_\_\_\_\_  
Sweatshirt size: Youth S / Youth M / Youth L / Youth XL / S / M / L / XL  
Food Allergies: \_\_\_\_\_  
Medical Concerns: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_  
Phone (in case of emergency) \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

\* I hereby hold harmless all organizers, instructors, participants, and others associated with this event in case of an accident or injury and permit the release of any photos for promotional reasons:

Signed: \_\_\_\_\_ (Parent/Guardian) Date: \_\_\_\_\_

# T-SHIRT DESIGN:

