

GMS Dance CLINIC 2025

THE CLINIC:

When: Saturday, October 18th from 8:30-11:00 am (*Arrive between 8:00-8:30 am to sign-in!*)

Where: Georgetowne Middle School (*gym and cafeteria*)

Who: Any aspiring dancers in Kindergarten through 5th Grade

What to Wear: An outfit that allows easy mobility, socks, dance shoes or tennis shoes

Sneak-Peek Performance for Parents: 10:45 am in the GMS gym

Pick-Up: Approximately 11:00 am (*after the preview performances*)

THE PERFORMANCE:

When: Tuesday, October 21st (*Arrive between 4:40-4:55 pm to sign-in!*)

(The performance will be held during halftime of the GMS girls basketball game. The game begins at 5:00, so the performances will begin at approximately 5:30 pm.)

Drop-Off: The front doors of GMS (*The clinic dancers will be escorted downstairs by members of the GMS Dance Team.*)

Pick-Up: The GMS Auditorium (*Clinic dancers will not be permitted to leave unless there is a parent/guardian present to pick them up.*)

What to Wear: Black leggings, dance shoes or tennis shoes, and the official dance clinic t-shirt

THE PRICE: \$30.00 (This price includes dance instruction from members of the GMS Dance Team, a t-shirt, a snack & drink, and two complimentary tickets for the game.)

ADDITIONAL INFORMATION:

- A snack will be provided mid-session (on October 18th), but participants may want to bring water bottles labeled with their names. Also, if clinic dancers have a food allergy, please be sure to include that information on the sign-up sheet.
- If you would like to see a sample of what the dancers will perform at the basketball game, you may come to the GMS gym on the day of the clinic at **10:45 am**. After all performances, at approximately 11:00 am, you may pick up your dancer.
- Clinic t-shirts can be picked up upon arrival at the game on October 21st.
- If you are unable to make the performance, clinic t-shirts can be picked up from the GMS office beginning Wednesday, October 22nd.

REGISTRATION OPTIONS:

- **Drop-Off Registration:** Fill out the attached form, write a check to **District #102 (Memo: GMS Dance Clinic)**, and drop off at the front office of GMS or MES. Please label the envelope **Mrs. Maize- GMS Dance Clinic**.

Drop-off forms & required fees must be received by the end of the school day on September 26th.

- **Mail-In Registration:** Fill out the attached form, write a check to **District #102 (Memo: GMS Dance Clinic)**, and mail to:
GMS Dance Team
C/O Mrs. Maize
51 Yates Road
Marquette Heights, IL 61554

Mail-in forms & required fees must be received by the end of the school day on September 26th.



If you have any questions, please email Coach Maize at
kmacdonald@dist102.org



GMS Dance TEAM- 2025 CLINIC FORM

Please legibly print all information!

INFORMATION:

Student's Name: _____ (first and last name)

Grade: _____

School Currently Attending: _____

T-SHIRT SIZE (PLEASE CIRCLE ONE):

child small

child medium

child large

child extra large

adult small

adult medium

adult large

adult extra large

In the space provided, please list any important information about this student (medical/allergies/etc.) that you think we should know for the clinic or the performance:

EMERGENCY INFORMATION:

Guardian's Name: _____ (first and last name)

Primary Contact #: _____ Secondary Contact #: _____

Email Address: _____
(Should you wish to attend the clinic again, we will use this email address to notify you of next year's information.)

GUARDIAN PERMISSION:

I give my permission to allow my child to participate in the GMS Dance Clinic and performance. I understand that the GMS dance coach, dance team, and parent volunteers will do their best to watch my child and provide a rewarding experience, but District 102 and the GMS Dance Team are not liable for any injury that should occur.

Guardian Name (print): _____

Guardian Signature: _____ Date: _____