Waverly Dance Team

JR DANCE Clinic

DANCE ✦ LEARN ✦ PERFORM

CLINIC DATE:
SATURDAY, DEC. 5TH
9:00 AM – 12:00 PM

LOCATION:
WAVERLY MIDDLE SCHOOL GYM

GRADES:
PRESCHOOL – 5TH

Join us for a fun-filled dance clinic with the Waverly Dance Team!

Learn a high-energy routine, build your skills, and get ready to perform!

PERFORMANCE:
WAVERLY HIGH SCHOOL HALFTIME OF THE BOYS BASKETBALL GAME
12/10/26

Don't miss this chance to dance like a star!

SCAN TO REGISTER

Waverly 2026 Jr Dance Clinic

For all students in grades PreK–5
Jr. Dancers will be taught a short dance
and introductory techniques of dance.

Clinic: Saturday, December 5, 2026, 9:00 a.m. – 12:00 p.m. at Waverly Middle School gym

*Participants should wear tennis shoes, a T-shirt, and shorts or leggings for the clinic.

Cost: $45 includes t-shirt, bow and snack during the clinic

Performance: Thursday, December 10, 2026 at 6:45 p.m. at Waverly High School gym

*Jr Dancers will perform during halftime of the boys varsity basketball game.

*Please arrive by 6:45 p.m. and meet at the Waverly High School Auditorium (theater)

Jr. Dancers will receive their T-shirt and bow before the performance at the basketball game. They should wear their T-shirt with black shorts/pants, and tennis shoes for the game performance. Dancers should come with hair ready to go for performance. After the performance, parents must pick up their dancers from the Auditorium.

Admission will be free for the participants. Parents, siblings, and anyone else attending to watch will be charged admission.

Contact Dance Parent - Wendi Retzlaff at 402-926-1001 with any questions.

Register below or by using the QR code:

Return the bottom of this sheet and send cash or check made payable to District 145 – Dance to your school office or mail to Paige Piper at: Waverly High School, 13401 Amberly Rd, Waverly, NE 68462.

Registrations must be returned by Friday, November 27, 2026.

Print name of participant: _____ Grade: _____

Parent name: _____ Cell #: _____

Address: _____ City, Zip: _____

Parent email: _____

Emergency contact: _____ Cell #: _____

T-shirt size (circle one): Youth S M L Adult S M L

Parent Guardian Participation Permission and Waiver

I give permission for my son/daughter to attend the Waverly Dance Team Jr. Dance Clinic on December 5, 2026 and performance on December 10, 2026. I understand that neither the Waverly Dance Team, Waverly Dance Coach, nor Waverly Public Schools are responsible for lost or stolen items. I, hereby, release the Waverly Dance Team and its associates from any and all claims of damage or theft of any personal property used or left on the premises. I, hereby, release the Waverly Dance Team and its associates from any and all claims of illness, injury, or death as a result of participation in this event. I understand and agree that any and all photographs or video footage of my child obtained during this event may be used in publications related to the Waverly Dance Team without further notice or compensation.

Parent/Guardian signature: _____ Date: _____

Parent/Guardian printed name: _____

Please list any medical conditions or allergies the clinic staff should be aware of while your child is at the clinic.

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