



Come Dance with the




Join us for a day of fun and learn a Pom, Hip-Hop or Advanced Dance routine to perform for family and friends at the end of the clinic! No dance experience is required. All money raised will help our Bellaire Belles pay for uniforms, camps, and spring competitions.



Option 1:
Traditional Pom Dance Routine
For All Boys & Girls K-8th grade



Option 2:
Hip Hop Routine
for all Boys & Girls K-8th grade



Option 3:
Advanced Dance Routine
for all Boys & Girls 6th-12th grade

Great chance to see what it takes to be a future Bellaire Belle!

DATE: Saturday, June 10th, 2023
Where: Bellaire High School Gym at 5100 Maple St., Bellaire, TX 77401
Time: 9 am – 12 noon
 9:00 Registration and check-in
 Participants must wear t-shirt provided at registration
 9:30 Warm Up
 10:00 – 11:30 Dance Activities
 11:30 Show-Off Performance for parents
 12:00 Clinic Ends

Cost: \$40 in advance \$45 at the door and registrations received after deadline.
Includes: Belles Dance Clinic T-Shirt (not guaranteed for walk-ins), snack and certificate.
 *Registration must be received no later than **Friday, June 2nd** to be guaranteed a T-shirt*
Payment: Make checks payable to **BBBC** (Bellaire Belles Booster Club)



Mail completed form with payment to: Attn: Ms. Denman, Bellaire Belles Dance Team, 5100 Maple St., Bellaire, TX 77401
or register online with a credit card payment – fill out the registration form at <https://forms.gle/Nhm6h4qLmvi9kJE46> or scan the QR code and make a credit card payment at <https://bellairebelles.org/dance-clinic-2023/>

Wear athletic clothes & tennis shoes comfortable for dancing. Bring a filled water bottle.

Questions? Contact: Bellairebelles@gmail.com

For more information about the Belles go to our website <http://www.bellairebelles.org/> or Facebook page @bellairebellesdanceteam

Please Print All Information Clearly.

Dancer Name: _____ Grade: _____ School: _____

Address: _____ Circle One: Pom-Pom Hip Hop Advanced Dance

T-Shirt Size: YXS YS YM YL AS AM AL

Parent Name: _____ Parent's Cell Phone #: _____

Email Address: _____ Referred by Belle name: _____

My child has my permission to participate in the dance clinic sponsored by the Bellaire Belles Dance Team and the Bellaire Belles Booster Club on Saturday, June 10th, 2023. I hereby waive and release Bellaire High School, Bellaire Belles Dance Team and Bellaire Belles Booster Club from any liability for any injuries incurred during the clinic and give authority for any emergency treatment necessary.

Parent/Guardian Signature: _____