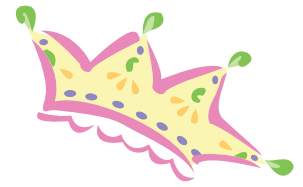


# Summer 2010



Dance Express 2105 N. Broad Ct Mankato, MN 56001

Phone (507) 625-3865



## Fairy Princess Camp

July 19th - 23th

FOR AGES 3 1/2-7  
(prior experience is not necessary)

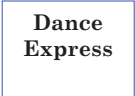


Please join us in our  
**MAGICAL KINGDOM ...FOR A ROYALLY GOOD TIME!!**

Dance Express is very excited about offering a dance "day" camp for our youngest dancers. Each day we explore a new "princess" and have a different princess theme of the day. The camp will run Monday July 19th through Friday July 23rd daily. Choose from morning session at 9:00 am-11:30 am. or afternoon session at 12:30 pm -3:00 pm. For children wishing to do both sessions students may bring a sack lunch and will be supervised during the hour break. At the end of camp each day we put on a mini show for parents and friends to "show-off" what we've learned that day. Activities include singing, dancing, play acting, coloring, storytelling, creating treasure boxes, crowns and other fun crafts, applying makeup and lots of other fun games. We also have daily "royal snack time". ATTIRE: Children are encouraged to wear a princess or ballerina costume from home. Full payment of \$85 is due at the time of registration to insure your place in this camp. Come join us for this fun-filled week.

*Your paid registration will confirm your spot in the camp. No further information will be sent. If you have questions please feel free to call Dance Express at 625-3865*

Dance Express Fairy princess Camp Registration July 19-23



Name: \_\_\_\_\_ Age \_\_\_\_\_ Grade (in fall) \_\_\_\_\_

Morning Session 9:00 am-11:30 am \_\_\_\_\_ Afternoon Session 12:30 pm-3:00 pm \_\_\_\_\_ Both Sessions \_\_\_\_\_

Guardian \_\_\_\_\_ Phone (home) \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_

I/we hear by request that you accept the enrollment application of \_\_\_\_\_ in the Dance Express summer mini camp during the dates set forth in this application and in consideration of your acceptance of this application, I/we hereby release Dance Express and all its employees from all claims on account of any injuries which may be sustained by my/our daughter/son while attending Dance Express. I/we also certify that my/our daughter/son is medically fit to participate in your program.

Parent or guardian's signature \_\_\_\_\_ date \_\_\_\_\_

Check # \_\_\_\_\_

You may drop this form at the Dance Express Office or mail to:  
Dance Express  
2105 N. Broad Court North  
Mankato, MN 56001 For questions call (507)625-3865