



**VISTA RIDGE HIGH SCHOOL STAR STEPPERS  
2019 "PRINCESS FOR A DAY"  
DANCE CLINIC REGISTRATION FORM**



**Place:** Vista Ridge High School (use side entrance facing football field)  
**Date:** Saturday, September 21, 2019  
**Time:** 9:00 am – 2:00 pm  
**Show offs:** 2:00-2:30 (family and friends welcome)  
**Ages:** Pre-K through 12<sup>th</sup> grade  
**Cost:** \$40 includes T-shirt, certificate with picture, and lunch  
**Dress:** comfortable clothes for dancing

**Completed registration form and payment (payable to VRHS Star Steppers) must be received by September 14, 2019. Drivers License must be included on all checks. Please send form and payment to:**

Vista Ridge High School  
200 S. Vista Ridge Blvd.  
Cedar Park, TX 78613

Attn: Star Steppers Booster Club

**OR Register online at [vrstarsteppers.com](http://vrstarsteppers.com)**

**Walk-ins and late registration welcome at an additional \$5 charge. Walk-ins please arrive 30 minutes prior to the start time to process registration.**

**Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_ **Phone** \_\_\_\_\_

**T-Shirt size:**      Youth S (6-8)      M (10-12)      L (14-16)  
 (Please circle one):    Adult S (34-36)      M (38-40)      L (42-44)      XL (46-48)

**(Walk-ins or late registrations may not receive their t-shirts the day of the clinic.)**

**Please circle lunch preference: Hot Dog or Peanut Butter & Jelly Sandwich**  
*(All lunches served with chips, fruit, dessert, and lemonade)*

**List Food Allergies:** \_\_\_\_\_

**Parent or Guardian** \_\_\_\_\_

**Emergency Phone** \_\_\_\_\_

**School** \_\_\_\_\_ **Teacher** \_\_\_\_\_

**WAIVER OF CLAIMS:** "I hereby release any claim I might have against Leander Independent School District, or any of its agents, which might arise from any injury or other damage my child might incur while on the property of LISD or while participating in any activity sponsored by LISD."

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_  
 (If an e-mail address is provided, a reminder will be sent the week of the dance clinic.)

**Save the Date**

**HOLIDAY DANCE CLINIC: November 16th**

**SPRING SHOW CLINIC: March 28<sup>th</sup>**