



A Connecticut Creative Arts Organization



## Move & Create

with Pilobolus

**Grades 1-5**

*Burnham School, Bridgewater*

**2017 | Mondays, Thursdays, Fridays | 3:45-5:15pm**  
**Nov. 27, 30, Dec. 4, 7, 8**

**5 sessions: \$75 • \$60 Region 12 students**

ASAP! provides a healthful snack and supervision for Burnham School students after school until the workshop begins.

Work directly with a member of the internationally renowned Pilobolus Dance Theater for an exhilarating, collaborative dance workshop. You will explore, invent, interact, and become involved in Pilobolus' signature style of creating dance. You'll see the limitless possibilities within the medium of movement as you become more comfortable with being physically creative, collaborative, and expressive. There will be an informal "showing" from 5:00-6:00pm on the last day of the program for family and friends. **Participants of this program can also join Pilobolus on stage on Jan, 6 when ASAP! Presents Pilobolus at Danbury High School 2pm and/or 7pm shows!**

For more information or to view our privacy policy, visit our website [www.asapct.org](http://www.asapct.org), or feel free to call us at 860-868-0740 or email us at [asap@asapct.org](mailto:asap@asapct.org). ASAP! After School Arts Program® is a registered trademark of After School Arts Program, Inc. The After School Arts Program, Inc. is a 501(c)3 non-profit organization. Registration is on a first come, first served basis. Please recycle this paper. Refunds are not available. **Financial aid is available to those in need.**

## REGISTER ME for Move & Create | Grades 1-5



### Student Information:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: M F School: \_\_\_\_\_

Special Needs/Allergies: \_\_\_\_\_

Emergency Contact (Name): \_\_\_\_\_ Emergency Contact (Phone): \_\_\_\_\_

Is there anything about your child that would be helpful to us? \_\_\_\_\_

### Parent/Guardian Information:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

AMOUNT ENCLOSED \$ \_\_\_\_\_ Make checks payable to ASAP! and mail to: ASAP!, P.O. Box 15, Washington Depot, CT 06794

Contact me about volunteer opportunities.

NO, I do not wish to receive ASAP!'s e-mail newsletter for upcoming workshops and events.

I will hold harmless the Town of Washington, the After School Arts Program, Inc., Region 12 schools, Burnham School, the Town of Bridgewater, and any of its agents, directors, employees, and supervisors for any responsibility or liability for any injuries or property damage which may arise from my or my child's participation in this program. I understand that in the event of any injury, my own personal medical insurance will be used.

I, the undersigned, authorize ASAP! to record on video tape, photography, voice recording, or interview through print or other media, my child's first name, voice, image, artwork, and/or performance for informational programs, reports and promotional materials to be used for non-commercial purposes. I understand that neither my child nor I will receive compensation for this appearance and no private individual will receive compensation of any kind as a result of broadcasting this material.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_