



# DANCE-A-THON!

## Where and When:

New Lebanon Junior/Senior High School  
Friday, March 14<sup>th</sup> 6:00PM-10:00PM  
On site check in begins at 5:00  
\*\*\*Registration deadline is February 27<sup>th</sup>.\*\*\*  
Sponsored by the Spirit Club

## Who is eligible to participate?

Everyone!!!! Children under 11 years of age must have a parent present during the event.  
**\$10.00 registration fee is due by February 27<sup>th</sup>.**

## Other Details:

- ✓ \$10.00 registration fee for each participant.
- ✓ All donations are due at check-in.
- ✓ Every participant will receive a t-shirt.
- ✓ Participants 11 years or younger will be required to have a parent present during the event. No exceptions.
- ✓ The Dance ends at 10:00PM, you do not need to stay for the entire duration of the dance.
- ✓ The dance will be chaperoned by adults on a 1:15 adult to child ratio.
- ✓ Parents are encouraged to participate.

Checks should be made payable to:  
**Albany Medical Center**

**Please send all registration forms and the \$10.00 registration fee to:**

New Lebanon Junior/Senior High School  
14665 State Route 22  
New Lebanon, N.Y. 12125  
Attention: Dance-A-Thon



## DANCE-A-THON!

Sponsored by the New Lebanon Spirit Club

March 14<sup>th</sup>, 2014 6:00pm-10:00 PM

New Lebanon Jr./Sr. High School

To Benefit: Albany Medical Center, Children's Hospital

Participant's Name

Phone Number

Address

City

State

Zip

Please support me at the Dance-A-Thon, which will help provide assistance to children who are being treated at Albany Medical Center, Children's Hospital.

My goal is to raise \_\_\_\_\_ by February 27, 2014 to secure my spot at the Dance-A-Thon on March 14, 2014.

Please be sure to include each individual's name & address. A receipt of donation will be mailed to each individual.

Please use attached sheet for pledges. All pledges and registration fees are due by February 27, 2014.

Thank You!

Christine Bienes

Event Director/Spirit Club President



DANCE-A-THON!

## Registration Form & Waiver

Participants Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Name of School: \_\_\_\_\_

T-Shirt Size: (circle one) Children's : Small Medium Large Extra Large

Adult: Small Medium Large XL XXL

Mother/Guardian's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

In case of emergency, and a parent/guardian cannot be contacted, the event organizer is authorized to contact others as indicated below in the order listed:

Name (friend/relative): \_\_\_\_\_ Phone: \_\_\_\_\_

Name (friend/relative): \_\_\_\_\_ Phone: \_\_\_\_\_

### Participant Code of Conduct:

- ✓ Refrain from the use or possession of alcohol, drugs, or tobacco.
- ✓ Refrain from any form of hazing of fellow participants.
- ✓ Refrain from any use of foul language.
- ✓ Maintain high standards of conduct as a student and a citizen.
- ✓ Follow the School Code of Conduct

We agree that the participant code of conduct and terms of participation in the Dance-A-Thon are important to the safety of all participants. We agree to abide by these rules and terms of participation and to conduct ourselves accordingly.

Signed: \_\_\_\_\_

Student/Participant

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

Parent/Guardian

Date: \_\_\_\_\_

# PLEDGE FORM



DANCE-A-THON!

Participant Name \_\_\_\_\_

Phone # \_\_\_\_\_

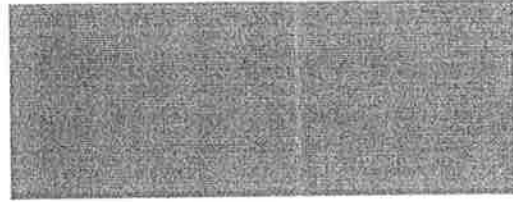
★	Pledge \$5 \$10 \$15 \$20	Name & Address Full Name, Street, City, State, Zip	Total Donation

Thank you for your support! If you have additional pledge forms, please attach them. All registration fees and pledge forms are due on February 27<sup>th</sup>. **Checks payable to: Albany Medical Center.**

Signature of Participant \_\_\_\_\_

Total Collected \_\_\_\_\_

Christine Bienes  
New Lebanon High School  
14665 State Route 22  
New Lebanon, NY 12125  
Phone: 518-894-9673  
Fax 518-766-6265  
[cmbienes@gmail.com](mailto:cmbienes@gmail.com)



# Press Release

**New Lebanon High School Spirit Club to hold Dance-A-Thon to benefit  
Albany Medical Center Children's Hospital**

**The dance-a-thon will take place on Friday, March 14, 2014, from 6:00PM-10:00PM  
at the New Lebanon high school., 14665 State Route 22, New Lebanon, New York.**

Registration forms are available on line @ [newlebanoncsd.org](http://newlebanoncsd.org). Each participant is asked to pre-register, The cost is \$10.00 per dancer, and pledges are also greatly appreciated. Please check the school web-site for more information and forms.

For additional information please contact: Christine Bienes – [cmbienes@gmail.com](mailto:cmbienes@gmail.com) or 518-894-9673.