Baudette Just For Kix

This is more than dance.

Here, memories are made.

Register this SPRING using our NEW & IMPROVED online registration site

We have made the change to online registration in order to streamline the registration and payment process and make it more convenient for our families. We have made many improvements to the process to make it even easier for you. Follow the registration directions below to complete your registration for the upcoming season! If you do not have online access, return packet materials to your area director for registration assistance.

New features include:

- Family Login: One login now for your whole family. Add as many dancers to your family account as you would like.
- Faster System: The new system will better handle the heavy load during the busy registration and payment times.
- Recurring payments: With Recurring Payments, your monthly bill is automatically charged to the credit/debit card you specify.
- Registration fee is a \$15 annual fee for first participant in family and \$9 for each additional family participant.
- Receive \$1 discount per month per class when 4 or more months are paid in advance.

Online Registration Opens on April 20

A Register early to secure your spot in class and ensure early fall uniform delivery!

Mail-in registration:

Complete the enclosed forms, put in an envelope along with your registration fee of \$15.00 and the uniform payment. (In regards to the uniform payment - subtract off any pieces that you already have! If your dancer's class is not changing uniforms, there is no need to include a uniform payment.) Your dancer can submit this packet right at class and their registration will be complete. We will take care of the uniform sizing for you. You can also mail the forms to Just for Kix PO Box 724, Brainerd MN 56401.

THANK YOU

for allowing me to work with your dancers this season. **See you in class!**

Amy Potts

218-689-0929

baudette_mn@justforkix.com

Share Just For Kix with your friends! Take extra Registration Packets.

How to Register

- 1. Go To: classes.justforkix.com
- Click "Sign up" in the Upper Right hand Corner
- 3. Click "Sign up now"
- Create an account Steps 1-3
 This will be your family account: you should enter the parents/guardian information here. There will be a place to register individual students later.
- 5. Do a search on your Zip Code. Only classes that apply to your child(ren) will show up in the listing. You can further filter the search by day/time or you can search by the course number listed by the class in this registration packet.
- Add classes and uniform pieces that you would like to register for and order. You can check out all at once at the end of the process. Registration Fee and first month payment due at time of registration.







3 lucky winners will receive An American Girl Doll - Grace. Over \$100 value

One 18 Grace doll. She comes with the Grace paperback book, plus her Paris welcome outfit: A white top with a sparkly Paris graphic, a pink skirt with a black bow on the front, pink underwear, a charm bracelet that Mom gave her and gray ankle boots with gathered straps and bows on the sides.

50 lucky winners will get **\$20** gift certificate*

* Gift certificate only applies to Just For Kix catalog products. Exclude Customwear and program uniforms

By registering online by 6/1/15, you are gualified for our giveway contest! Visit classes.justforkix.com and register online, order the uniform and pay your registration fees. Go to the registration tab when you log in with your username/ password. If you need your log in information call Just For Kix at 218-829-7107. Registering for class is just a click away!



Come to the 2015 Youth **Dance Camp!**

Dates & Rates:

Austin, MN \$103

7/30 - 8/1

St. Olaf Church

Apple Valley, MN \$103

8/6 - 8/8

Eastview High School Bismark, ND

6/25-6/27

University of Mary Overnight Dancer- \$170 Commuter Dancer- \$115

Brainerd, MN \$103

7/23-7/25

Forestview Middle School

Duluth, MN \$103

6/28 - 6/30

The Inn on Lake Superior

Fargo, ND \$103

7/16-7/18

Veterans Memorial

Center/ West Fargo High School

Hastings, NE \$103

7/17-7/19

Hastings College

Loveland, CO \$130

6/30-7/2 **Embassy Suites**

Rochester, MN \$130

6/15 - 6/17

Rochester Community Technical College

Rockford, IL \$115

7/24-7/26

Rockford University

Sioux Falls, SD \$103

7/6-7/8

Oak Hills Church

Spencer, IA \$115

7/13-7/15

Spencer Event Center

St. Cloud, MN \$103

K-4th: 7/6 - 7/8

5th-9th: 7/9 - 7/11

St. Cloud Just For Kix

Studio

Get Registered...it's Easy.

Go to www.justforkix.com/youthcamps

and click Register or call 800-450-3262. Remember camps fill up quickly. Register today to reserve your spot!



Schedule for Baudette - MN

Facility	Style	Class Name	Fee	Grade / Age	Day	Time	Uniform	Instructors	Start Date	End Date
Lake of the Woods Schools	Kick	Kick: Tiny	28.00	4-5 yrs	М	5:30p.m 6:00p.m.	Dance Princess	Amy Potts	9/14/15	4/25/16
Lake of the Woods Schools	Kick	Kick: Wee Petite	31.00	K-1	М	3:30p.m 4:30p.m.	Musicology	Amy Potts	9/14/15	4/25/16
Lake of the Woods Schools	Kick	Kick: Wee	31.00	2-4	М	4:30p.m 5:30p.m.	Glitz	Amy Potts	9/14/15	4/25/16
Lake of the Woods Schools	Kick	Kick: Mini	31.00	4-6	М	6:00p.m 7:00p.m.	I've Got Spirit	Amy Potts	9/14/15	4/25/16
Lake of the Woods Schools	Kick	Kick: Middle	31.00	7-9	М	7:00p.m 8:00p.m.	Ring The Alarm	Amy Potts	9/14/15	4/25/16



Kick: Tiny

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

M 5:30p.m. - 6:00p.m. • Age 4 - 5

\$28.00/per month

Receive \$1 discount per month per class when 4 or more months are paid in advance

Dates: 9/14/15 - 4/25/16

Facility: Lake of the Woods Schools

Instructors: Amy Potts
Course #: MK130



Dance Princess

1	Size	Item#	Description **required	Price
		05	Black Ballet Shoe**	\$16.00
		40	Black Footed Tight by Alexandra**	\$9.00
		M135	DANCE PRINCESS LEOTARD**	\$19.00
		C606HP	HOT PINK TUTU- CHILD**	\$13.00
		H0110	TIARA	\$8.00

Check the item(s) you want to order

Class Fee	
Registration Fee	\$15.00

^{**}Item required for performance.

Baudette - MN

Student's name (print):

æ

*if 2 pairs of shoes are listed, only 1 required,

making the total price less than shown.

Total:

Kick: Wee Petite

M 3:30p.m. - 4:30p.m. • Grade K - 1

\$31.00/per month

Receive \$1 discount per month per class when 4 or more months are paid in advance

Dates: 9/14/15 - 4/25/16

Facility: Lake of the Woods Schools

Instructors: Amy Potts
Course #: MK132





1	Size	Item#	Description **required	Price
		41	Tan Footed Tights by Alexandra**	\$9.00
		M274	Musicology**	\$38.00
		1531	Gold Shorts**	\$18.00
		H1003	Gold Foil Flower	\$8.00
		11	Tan Alexandra Jazz Shoe**	\$32.00

♠ Check the item(s) you want to order

Class Fee	
Registration Fee	\$15.00

^{**}Item required for performance.

Bauc	lette -	М	N
------	---------	---	---

Student's name (print):

Total:_____



Kick: Wee

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

M 4:30p.m. - 5:30p.m. • Grade 2 - 4

\$31.00/per month

Receive \$1 discount per month per class when 4 or more months are paid in advance

Dates: 9/14/15 - 4/25/16

Facility: Lake of the Woods Schools

Instructors: Amy Potts
Course #: MK131





1	Size	Item#	Description **required	Price
		05	Black Ballet Shoe**	\$16.00
		M226	Leotard - GLITZ**	\$45.00
Г		B534	Jazz pant**	\$33.00
		H0147	Turquoise Double Ruffle Binder	\$7.00

Check the item(s) you want to order

Class Fee	
Registration Fee	\$15.00

^{**}Item required for performance.

Baudette - MN

Student's name (print):

<u>~</u>

Kick: Mini

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

Total:

M 6:00p.m. - 7:00p.m. • Grade 4 - 6

\$31.00/per month

Receive \$1 discount per month per class when 4 or more months are paid in advance

Dates: 9/14/15 - 4/25/16

Facility: Lake of the Woods Schools

Instructors: Amy Potts
Course #: MK129

Uniform: I've Got Spirit



1	Size	Item#	Description **required	Price
		05	Black Ballet Shoe**	\$16.00
		M516	I've Got Spirit Top**	\$59.00
		B534	Jazz pant**	\$33.00
		2362	Pink Metallic Flowers**	\$3.00

Check the item(s) you want to order

Class Fee	
Registration Fee	\$15.00

^{**}Item required for performance.

Baudette - M	N
--------------	---

Student's name (print):

Total:_____



Kick: Middle

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

M 7:00p.m. - 8:00p.m. • Grade 7 - 9

\$31.00/per month

Receive \$1 discount per month per class when 4 or more months are paid in advance

Dates: 9/14/15 - 4/25/16

Student's name (print):

Facility: Lake of the Woods Schools

Instructors: Amy Potts Course #: MK2173





1	Size	Item#	Description **required	Price
		05	Black Ballet Shoe**	\$16.00
		B534	Jazz pant**	\$33.00
Г		H0201S	Sequin Headband - silver**	\$4.00
		M524	Ring the Alarm - Leotard**	\$55.00

Check the item(s) you want to order

Class Fee	
Registration Fee	\$15.00

^{**}Item required for performance.

Baudette - MN	Total:

Do NOT use this form if you are registering online.

Just For Kix Dancer Personal Data/Medical Form

Address:	Dancer's Name:			Date of Birth:	Date of Birth:	
City: State: Zip: Home Phone: ()						
*Primary E-mail Address: Student Email Address: **Student Email Address: **Preame not that this is our PRIMARY source of communication, and this will be our contact for updates and information. In most cases this should be a pavent. **You renal information may also be added to our distinate to notify you of special catalog others, discounts, tips and updates are well as current/uccoming events offered by Just For Rix. **Work Plane: **Grade: **Work Phone: () **Mother's Email (if different than above): **Cell Phone: () **Father's Name: **Work Phone: () **Cell Phone: () **Tehint Size: YXS - 2/4 YS - 6/8 YM - 10/12 YL - 14/6 AS AM AL AXXL **If you have a sibling in the program, please list their name and grade: **How did you hear about JFK?** **If parents/guardians cannot be located, who should be contacted in case of an emergency? Name: **Work Phone: () **Cell Phone: () **Mork Phone: () **MEDICAL INFORMATION: If, in the judgment of any representative of Just For Kix, the above dancer should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. **Do you have Allergies or allergic reactions to medications? **Do you have Allergies or allergic reactions to medications? **Do you have Allergies or allergic reactions to medications? **Do you have allergies and allergic reactions to medications? **Do you have allergies and allergic reactions to medications? **Do you have allergies or allergic reactions to medications? **Do you have allergies or allergic reactions to medications? **Do you have allergies or allergic reactions to medications? **Do you have allergies or allergic reactions to medications? **Do you have allergies or allergic reactions to medications? **Do you have allergi				Home Phone: ()	
**Please and that this is our PRIMARY owner of communication, and this will be our contact for updated and information. In more cases this about to a parent. Your realishing may be be added to a discount of the property of					,	
Vote mail in the processed information with any other company. School: Grade: Grade: Grade: Work Phone: ()	Student Em	nail Address:				
Mother's Name:		Your email info may also be added to our database to notify you	of special catalog offers, discounts,			
Mother's Name:	School:			Grade:		
Mother's Email (if different than above): Cell Phone: ())	
Father's Email (if different than above):	Mother's Er	mail (if different than above):		Cell Phone: (
T-shirt Size: YXS - 2/4 YS - 6/8 YM - 10/12 YL - 14/6 AS AM AL AXL AXXL If you have a sibling in the program, please list their name and grade: How did you hear about JFK? If parents/guardians cannot be located, who should be contacted in case of an emergency? Name: Work Phone: () Cell Phone: () Work Phone: () Cell Phone: () Cell Phone: () MEDICAL INFORMATION: If, in the judgment of any representative of Just For Kix, the above dancer should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. Do you have Allergies or allergic reactions to medications? Do you have a previous medical condition(s) or physical/emotional problems that we should be aware of? RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	Father's Na	me:		Work Phone: ()	
If you have a sibling in the program, please list their name and grade: How did you hear about JFK?	Father's Em	nail (if different than above):		Cell Phone: ()	
If parents/guardians cannot be located, who should be contacted in case of an emergency? Name:	T-shirt Size:	□YXS - 2/4 □YS - 6/8 □YM - 10/12 □Y	′L-14/6 □ AS □ AM	□AL □AXL □AXXL		
Name:	If you have	e a sibling in the program, please list their	name and grade:	How did you hea	ar about JFK?	
MEDICAL INFORMATION: If, in the judgment of any representative of Just For Kix, the above dancer should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. Do you have Allergies or allergic reactions to medications? Do you have a previous medical condition(s) or physical/emotional problems that we should be aware of? RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	Name:			Work Phone: (Cell Phone: ()	
of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. Do you have Allergies or allergic reactions to medications? Do you have a previous medical condition(s) or physical/emotional problems that we should be aware of? RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).				Cell Phone: ()	
Parent or Guardian's Signature Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).						
RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	° Do you hav	ve Allergies or allergic reactions to medications? _				
events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	° Do you hav	ve a previous medical condition(s) or physical/emo	otional problems that we sho	ould be aware of?		
Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	events. I ass	sume all risks and hazards incidental to such partic	cipation including transporta	tion to and from the activities;	and do hereby waive, release, ab-	
past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	Parent or Gu	ardian's Signature				
Parent or Guardian's Signature Date	past due, my	dancer will be asked to sit out at class and will no	ot be able to participate in a			
	Parent or Gu	ardian's Signature		Date		

Photo Release: If you do not want your child's photograph and/or image published, or use for Just For Kix advertising please initial here.

