



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

NIGHT UNDER THE STARS

Father Daughter Dance

Their first words. Their first steps. Their first break-up. It may sound cliché, but it all goes by so fast. Whether she's 4 or 40, she'll always be your little girl and you'll always be the most important man in her life. We invite dads, grandfathers, uncles and male care-givers to create memories that will last a lifetime for the special girl in his life. Semi-formal dress attire (Recommended: Coat & Tie for dad, Dresses for daughters) - meal will be provided

WHEN

May 21 | 6-8pm

WHERE

Hickory Foundation YMCA
Gymnasium

REGISTRATION

Register at YMCA Front Desk or Online
Registration | April 20 - May 20
Day of Registration | May 21

REGISTRATION FEE

Registration:

\$40 per couple | \$55 2 or more daughters

Day of Registration:

\$50 per couple | \$65 2 or more daughters

For more information contact Hunter
Townsend at huntert@ymcacv.org



HICKORY FOUNDATION YMCA

701 1st St NW | Hickory NC 28601 828
324 2858 | www.ymcacv.org

2022 Father Daughter Dance Registration Form

Father's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

1st Daughter: _____ DOB: _____

2nd Daughter: _____ DOB: _____

3rd Daughter: _____ DOB: _____

1. I hereby certify that my child is in normal health and capable of safe participation in the Father Daughter Dance. I do acknowledge the risk of injury is possible while at the YMCA of Catawba Valley. I agree to waive all claims against and hold harmless the YMCA of Catawba Valley, staff, volunteers, and sponsors of the program. In the event that I cannot be reached to make arrangements for emergency medical attention at the time of illness or accident, I hereby authorize the YMCA of Catawba Valley to transport my child to the nearest medical facility for treatment deemed necessary.
2. I understand that there is a registration deadline with the YMCA must enforce and that there will be no refunds as the program is conducted.
3. I give permission to have my child's photo taken for YMCA publicity.

In witness whereof, I have executed this registration, Waiver / Release and Medical Certification Form.

Parent/Guardian Signature

Date