## THE EASTERN DISTRICT OF THE SOCIETY OF HEALTH AND PHYSICAL EDUCATORS (SHAPE AMERICA)

## Fall 2014

Celebrate the body in motion! Share with us the movement or dance that you and your students are engaged in an informal showcase at the SHAPE America convention. We are currently in the process of organizing the *Celebration of Movement Showcase* to be held at 5:30 pm on Friday, February 6, 2015, at the Springfield Sheraton Monarch Place Hotel.

We are inviting you to be a part of this year's showcase, which features all types of movement or dance. Are your students working on a creative movement unit in class? Or perhaps they have learned a new folk dance? Or maybe you are a community or senior group that does line dancing or ballroom dance? The Showcase invites all age groups, all types of dance, from all types of organizations (public/private schools, community groups, senior centers, universities, dance studios, etc...).

Each submission must be under 6 minutes in length. The performance space is accessible to wheelchairs. Music needs to be on a CD. Each group can submit up to two entries for performance. The performance showcase content will be constructed through a "first received, first accepted" method until the showcase time frame is filled.

Each group will be assigned a time slot to rehearse alone in the performance space prior to the Showcase. Spacing rehearsals are scheduled between 11:00 am - 4:15 pm on the same day for your travel convenience.

Attached is a 'Request to Share & Perform' form, which we would like you to fill out and return prior to January 22, 2015. The Showcase setting is an informal venue without the usual theatrical trappings of wings, lighting, etc.

We look forward to hearing from you, and to having you or your group as part of an wonderful evening with a variety of movement and dance. Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

Holly Boda-Sutton					
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## CELEBRATION OF MOVEMENT SHOWCASE 2015 ~REQUEST TO SHARE AND PERFORM~

## Please send prior to January 22, 2015. Submit materials to:

GROUP, S	CHOOL, STUDIO OR INSTITUT	ION DETAILS				
	Name					
	Address					
	City		State	ZIP		
	Phone		E-Mail			
CONTACT	PERSON DETAILS					
	Name					
	Phone E-Mail					
MOVEMENT PERFORMANCE DETAILS						
	Title of Performance/Dance					
	Music/Composer' Last name					
	Length of Dance (under 6 minutes) Number of Dancers					
	Choreographer(s)					
		Student D	Faculty/Instr	uctor 🗆	Guest Artist 🗆	
	Type of Performance:	Ballet 🛛	Jazz o	r Tap 🛛	Modern 🛛	
	World/Folk □		Latin/Ballroom			
	Class project or Creative Movement					

Short description: