



32nd SNOPA! International Dance Weekend
February 2018 -- Twin Cities, MN

By the sixteenth day of the second month the whole earth was dry, although probably because it was still frozen solid.

And Noah said, "Come out of the Arkan, every living creature! Living things of every kind, bird and beast and every reptile that moves on the ground or creeps within the earth or flies throughout the skies. Swarm over the land and form circles as you come forth two by two..."

*"Mademoiselle, voulez-vous danser
"la bastringue, la bastringue?
"Mademoiselle, voulez-vous danser?
"La bastringue va commencer."*

Isn't that how the story goes?

SNOPA! features:

- Workshops with plenty of time to work on the details of the dances.
- Best of both worlds – a beautiful rural setting on the banks of the St. Croix River, easily accessible from the town of Hudson and I-94.
- This year's featured local and regional teachers are Paul Wagner, Catherine Rudin and Mary Garvin.
- Friday dance party with your favorite recordings.
- Saturday night dance party, featuring music from the wildest depths of Rogaria by Orkestar Bez Ime.
- The dance party on Saturday night is a costume opportunity. We hope you'll be inspired by our theme. You could come two by two. You could be a carpenter with a weird boat obsession or a vengeful ocean (or a salt water fish bewildered about the whole fuss). Or just wear that fabulous outfit that simply doesn't quite fit in anywhere else.

February 16, 17, & 18

**Registration Deadline:
February 2, 2018**

Sorry, we cannot accept late registrations, as we must submit a head count for the food.

Suggested Supplies

- a sleeping bag and/or whatever you feel necessary for a twin sized bed in a heated cabin in the Upper Midwest in February (there is no linen service)
- pillow and pillowcase towels
- dance shoes easy on-off outdoor shoes
- alarm clock water bottle
- drums/instruments general toiletries
- favorite CDs or MP3s for the parties
- snowshoes or skis if you and the weather are so inclined
- flashlight/small reading light (lighting is sufficient for finding your bed, but not for details)
- snacks (see About Food on reverse)

A Schedule of the Festivities

All times except meals are subject to change, negotiation or general SNOPAness:

FRIDAY

- 5:30 Registration opens
- 6:00 Dinner and socializing
- 7:30 Dancing to your favorite recordings

SATURDAY

- 8:00 Breakfast
- 8:45 Warmups
- 9:00 Session 1
- 10:30 Session 2
- 12:00 Lunch
- 12:45 Warmups
- 1:00 Session 3
- 2:30 Open time/Singing/Social
- 5:30 Dinner
- 7:15 Dancing with live music

SUNDAY

- 8:00 Breakfast
- 9:00 Review sessions
- 12:00 Lunch
- 1:00 Clean up and head for home

Accommodations

- Sleeping accommodations will be in newly renovated bunk houses that generally hold 3-5 people per room. Depending on how many people we get, we may need to make use of some upper bunks. Please make sure you tell us (on the registration form) whether you're willing to be an upper bunk person, and whether you belong with the early-to-bed crowd or the giggling-into-the-wee-hours crowd. Bunk houses have some inside bathrooms, with additional nearby bath houses for the brave or impatient. Also please note that we do not have a linen package option this year, so please check the "Things to Bring" section for suggestions.
- Dancing accommodations will be a professionally installed, portable dance floor. It will be very slightly raised above the surrounding floor with a gently sloped drop-off. Please keep that in mind as you consider your choice of dance shoes, knee and ankle braces and other stabilizing gear.
- Other accommodations are something we'd like to work on. We want to make SNOPA as accessible as we are able to dancers of all physical abilities. If you have questions, or would like to request accommodations, please let us know by February 1.

Directions to Camp St. Croix

532 County Road F
Hudson, WI 54016

- Take your favorite route to Exit 2 (Country Road F & Carmichael Road) on I-94 in Hudson, WI.
- Travel 1.5 miles south on Carmichael Road.
- Camp St. Croix is on the right, shortly after Coulee Trail Road (County Road FF) and across from River Crest Elementary School.
- Check in: We'll have a check-in desk at the River Center (main building as you enter the camp). After 6:00 Friday, it might not be staffed, but check there to get your sleeping assignment and help finding the dining hall and Weyerhaeuser Lodge (where the dancing is).

About Food

All of our main meals (including Friday night) will be supplied by the Camp St. Croix staff. If you have special food needs, please make sure to indicate them on the registration form. We may not have exclusive use of the entire camp, therefore meal times are non-negotiable and we cannot "hold" your food. (If you can't make a meal for whatever reason, Camp St. Croix is quite close to downtown Hudson, WI, and its array of eateries). We'll also provide enough munchies to get you through a social hour Saturday before dinner. **You are welcome to bring snacks for yourself or to share, but make sure that they are stored in mouse-proof containers (not because there is a mouse problem, but to ensure that there is not).**

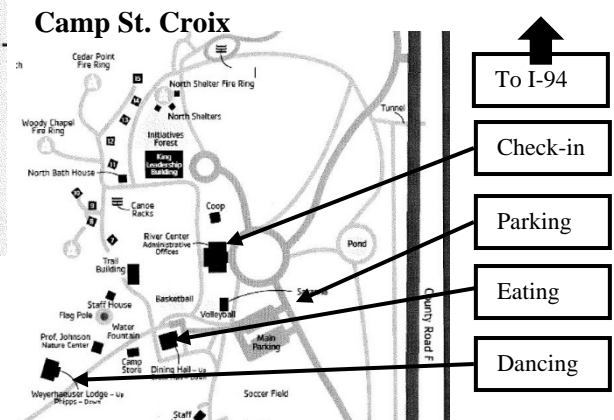
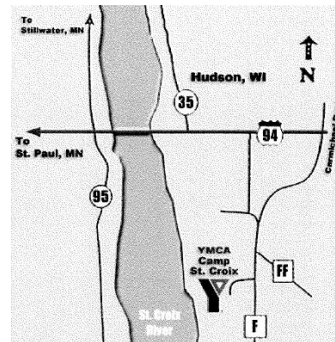
Questions?

Questions, registration:

Terry McGibbon, 651/639-9346 (hyebar@yahoo.com)

To arrange airport pickup:

Jim Kiehne, 612/741-8882 (jkiehne@epuffin.net)



Please visit <http://www.snopa.org> for more information, including larger scale maps.

SNOPA! is a nonprofit effort and is **not** a Tapestry function. ♦ Volunteers make it run. Thanks for your help during the weekend. Children are welcome as registered participants. (Parents must supervise their children's behavior. No youth activities are planned).

SNOPA! 32 "NOAH'S ARKAN" REGISTRATION

**Please note there
is no late
registration. You
must register by
February 2, 2018!**

Name(s) _____
 Address _____
 City _____ State/Prov _____ ZIP/Postal code _____ Country _____
 Tel. (H) _____ (W) _____
 E-mail _____

Please tell us if you have special food needs (vegetarian, vegan, etc)?

What are your bunk room preferences?
 single-sex **OR** co-ed (circle one)
 quiet **OR** potential for random late night parties (circle one)
 Would you be willing to sleep in a top bunk? YES NO (circle one)

Please put me in the same room as (most rooms sleep 3-5 people):

- ___ Ooo, sign me up for **The Whole Weekend**..... \$192 \$ _____
 (food and lodging Fri eve – Sun afternoon)
- ___ I can come on **Saturday Only**..... \$90 \$ _____
 (lunch, social hour, dinner, Saturday workshops and **The Party!**)
- ___ I can come for **Social Saturday Only**..... \$28 \$ _____
 (social hour @ 4ish, dinner and **The Party!**)
- ___ I can only come to **The Party!** (7:15 Saturday night)..... \$18 \$ _____
- ___ Don't stop the dancing!! I need a practice CD..... X \$12 \$ _____
- ___ Sure, print me a FREE syllabus, please. quantity _____

T-shirts (full design can be seen at <http://www.snopa.org>)
 Unisex:
 short-sleeved, cotton S M L XL XXL XXXL ___ X \$11 = \$ _____
 short-sleeved, 50/50 blend S M L XL XXL ___ X \$11 = \$ _____
 long-sleeved, cotton S M L XL XXL XXXL ___ X \$13 = \$ _____
 Ladies' fit:
 short-sleeved, cotton S M L XL XXL ___ X \$12 = \$ _____

****TOTAL FOR WEEKEND***** = \$ _____

To register: Make your check out to "SNOPA!" and mail with this registration form and the enclosed (Camp St. Croix required) "Release, Indemnification and Hold Harmless Agreement" to:

Terry McGibbon
1703 Skillman Ave W
Roseville MN 55113 (Sorry, but we cannot accept email registrations)

Camp St. Croix requires that all group leaders have emergency contact information for their participants. This information will not be shared with Camp St. Croix and will only be referenced in case of emergency.
 Your name: _____
 Emergency contact's name: _____
 Relation to you: _____
 Phone number(s): _____
 Do you have any issues of which you would like us to be aware?



RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of participating in YMCA activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence YMCA Greater Twin Cities (hereinafter referred to as YMCA) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My/My child's participation in these activities is purely voluntary and we elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I or my child are unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my/my child's participation in these activities, or our use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I or my child may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I/my child have no medical or physical conditions which could interfere with our safety in these activities, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Parent/Guardian Authorization Section

Transportation/Medical

1. In the event that I/my child need immediate medical attention for injuries received while participating in a YMCA program, I authorize the YMCA staff to give me or my child reasonable first aid, and to arrange transport of myself or my child to a health care facility for emergency services as needed.
2. I give permission for myself and/or my child to be transported by the YMCA as needed for field trips, inclement weather, or late pick up. I also give my permission to participate in walking field trips.
3. I also give permission for myself or my child to enter Canada with the YMCA. I also understand that I/my child will need to bring our passport to camp if the trip involves such travel to Canada.
4. I hereby acknowledge that the YMCA will assume that either parent of the child may pick up the child at any time during the program unless there is pertinent court documentation on file at the YMCA that indicates otherwise.
5. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. The YMCA receives medical information on campers/participants that may need to be shared with medical providers.
6. If I or my child requires use and administration of an epi-pen, prescription or over the counter medication, it is my responsibility to ensure that the epi-pen and/or medication are on me or my child or within our personal belongings every day of the program. If YMCA staff is required to administer and use the epi-pen and/or medication, I agree to forever release and discharge the YMCA and its directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen and/or medication.

General

1. I hereby release all pictures of myself or my child taken by the YMCA for promotional purposes and programming materials including the YMCA website.
2. I give my permission for the YMCA to administer sunscreen as needed.
3. I acknowledge that certain sections of this waiver may not apply to me and/or my child and the programs or activities that we have chosen but agree to be bound by any applicable language.

By signing this document, I agree that if I or my child is hurt or our property is damaged during participation in these activities, then I or my child may be found by a court of law to have waived our right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if the YMCA did not utilize waivers as a method to lower insurance and administrative costs. I have read and understood this document and I agree to be bound by its terms.

Group Name: SNOPA International Folkdance Weekend Date(s) on Site: February 16, 17, 18, 2018

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Telephone () _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT

(Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian _____ Print Name _____ Date _____