

2018-2019 Regional Competition Registration Form

PHONE: 866-695-4144

ALL ENTRY FORMS AND FEES MUST BE POST MARKED 30 DAYS BEFORE START OF COMPETITION.

MAIL TO: ADRENALINE DANCE: 7334 Whitehall St., Richland Hills, TX 76118

Please submit separate checks for convention workshop and competition fees. Make checks payable to **Adrenaline Dance Convention**. Photocopies of this form are acceptable. Refer to Adrenaline Dance Convention competition rules and regulations. PLEASE USE ONE FORM PER ROUTINE ENTERED. All competing dancers must be registered for the entire workshop to be eligible to compete. Entry is not valid until payment is received.

Studio Name: _____ Teacher Name: _____

Convention City: _____ Contact Name: _____

WILL THERE BE PROPS: _____ Choreographer: _____ Name of Number: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Email: _____

Competition Category (check one)

- Solo (3:00)
- Duo/Trio (3:00)
- Small Group (3:00)
- Large Group (4:00)
- Line (5:00)
- Production (6:00)

Age Division

- Average Age= _____
- Sparks (average age 5-7)
 - Mini (average age 8 -10)
 - Junior (average age 11-12)
 - Teen (average age 13-15)
 - Senior (average age 16-19)
 - Adult/Teacher (average age 20+)

Performance Category

- Tap
- Jazz
- Contemporary
- Lyrical
- Ballet
- Open
- Hip Hop
- Musical Theater
- Ballroom

COMPETITION CATEGORY	NUMBER OF DANCERS	PRICE Before/After Deadline	EXTENDED TIME	EXTENDED TIME COST	TOTAL
Solo (3:00)		\$120	X		
Duo/Trio (3:00)		\$60	X		
Small Group (3:00) (4 - 9 dancers)		\$50/\$55	\$5 per minute per dancer		
Large Group (4:00) (10 - 16 dancers)		\$50/\$55	\$5 per minute per dancer		
Line (17-24 dancers) (5:00)		\$50/\$55	\$5 per minute per dancer		
Production (6:00) (25+ dancers)		\$50/\$55	\$5 per minute per dancer		

Sub Total: _____

Grand Total: _____

Payment Info: Credit Card #: _____

Exp Date: _____ CVC Code: _____ Check # _____

Please print names of all dancers registering, attach additional sheet if necessary:

Name	Birthdate	M/F	Age Division: SP, MI, JR, TN, SR	Name	Birthdate	M/F	Age Division: SP, MI, JR, TN, SR
1. _____	____/____/____	____	_____	11. _____	____/____/____	____	_____
2. _____	____/____/____	____	_____	12. _____	____/____/____	____	_____
3. _____	____/____/____	____	_____	13. _____	____/____/____	____	_____
4. _____	____/____/____	____	_____	14. _____	____/____/____	____	_____
5. _____	____/____/____	____	_____	15. _____	____/____/____	____	_____
6. _____	____/____/____	____	_____	16. _____	____/____/____	____	_____
7. _____	____/____/____	____	_____	17. _____	____/____/____	____	_____
8. _____	____/____/____	____	_____	18. _____	____/____/____	____	_____
9. _____	____/____/____	____	_____	19. _____	____/____/____	____	_____
10. _____	____/____/____	____	_____	20. _____	____/____/____	____	_____

I, the undersigned, have the authority to sign this release on behalf of all the persons registered above and/or attached for this convention. I have read and agree to all the rules and regulations of Adrenaline Dance, Inc., Adrenaline Dance Inc., its instructors, the convention site, and the hotel are not liable for any loss/damage of personal property or personal injury of those participating or attending. I also authorize Adrenaline Dance to use images of the registered parties for advertising purposes.

Signature Required: _____

Date: _____