REGISTRATION FORM

DO NOT TEAR THIS FORM OUT OF YOUR BROCHURE
Make copies as needed.

2012 ENCORE NATIONAL FINALS COMPETITION

June 18-12, 2012

Studio Name _____ Studio Phone _____

Teacher Home Phone _____ Teacher Cell Phone _____ Studio Email _____

Studio Address _____ City _____ State _____ Zip _____

Instructor _____ Instructor/Director Email _____

AGE DIVISION (As of first day of showcase. Please average ages. 1/2 round up to next year) No changes (Division, Age or group) will be allowed after Monday the week of competition.

- ☐ 4 *& under*
- ☐ 5-6
- ☐ 7-8
- ☐ 9-10
- ☐ 11-12
- ☐ 13-14 *"TEEN"* NEW
- ☐ 15-16
- ☐ 17-19
- ☐ 20 *& over*

CATEGORY

- ☐ *Ballet/Pointe*
- ☐ *Ballroom*
- ☐ *Character*
- ☐ *Clogging*
- ☐ *Contemporary/ Modern*
- ☐ *Jazz*
- ☐ *Lyrical*
- ☐ *Musical Theatre*
- ☐ *Open*
- ☐ *Pom Pom/Cheer/ Dance Team*
- ☐ *Hip Hop/Funk*
- ☐ *Tap*

DIVISION LEVELS

*(Teacher Determines - See **Technical Specifics**)*

☐ I ☐ II ☐ III ☐ IV

Routines entered in "In-Correct" Divisions are NOT eligible for High Score.

REGISTRATION FEES:

- ☐ Solo $90 $_____ *(Limit 3 solos per dancer)*
- ☐ Solo Title $125 $_____ NEW *Miss/Mr. Encore – Petite, Junior, Teen, Senior (Limit 3 Title entries per dancer)*
- ☐ Duo/Trio $100 $_____
- ☐ Small Group *(4-9 dancers)* $45 *each* x ____ $_____
- ☐ Large Group *(10-18 dancers)* $45 *each* x ____ $_____
- ☐ Line *(19 + dancers)* $45 *each* x ____ $_____
- ☐ Production *(19 + dancers)* $50 *each* x ____ $_____

If Studio total is under $500, *then add* $100 *surcharge* $_____

STUDIO TOTAL $_____

REQUIRED Routine time *(minutes/seconds)* _____

Name of Routine _____

REGISTRATION FEES ARE NON-REFUNDABLE

ENCORE DOES NOT ACCEPT CHECKS.

ALL FEES MUST BE PAID BY **CREDIT CARD** OR **MONEY ORDER** PAYABLE TO:

ENCORE

Encore Performing Arts Showcase, Inc.
P.O. Box 26836, Fort Worth, TX 76126
Phone 817-926-9686 Fax 817-244-2998

Card Number: *Select one:* ☐ Visa ☐ MasterCard ☐ American Express

Name on Card _____ Exp. Date _____

Signature _____

PERFORMER ROSTER

Names of Performers *(Please print names)* Age Birth Date

_____

_____

_____

_____

_____

_____

_____

The undersigned for and in consideration of the acceptance into programs offered by Encore Performing Arts Showcase, Inc., do hereby agree to release Encore and the owners thereof, together with all individual directors, employees, and contractors, from any and all liability caused by reason of injury or ailment occasioned by participation in such program. The undersigned jointly and severally hereby personally assume all risks in connection with the participation in Encore and release the program directors, their agents and operators, as well as all employees and contractors from any injury, damage, or property loss which may occur while participating in such program, including all risks connected therewith, whether foreseen or unforeseen. I further release the above named from any and all claims that might be made for any reason during participation in Encore. I further agree and state that I have carefully read the above, including all rules and regulations, and agree to abide by the Encore Performing Arts Procedures. All photos and video footage taken during Encore events are property of Encore Performing Arts Showcase, Inc. **Liability** - Encore, its owners, directors and affiliates assume no liability for personal injury or property loss. As the Owner/Director/Instructor for this studio, I have read and understand the rules, guidelines, and Liability Release Requirements of Encore Performing Arts Showcase, Inc. My studio insurance will cover all Liability for my dancers, parents, and any attendees that may be affiliated with our studio at this Encore event.

SIGNATURE OF OWNER/DIRECTOR/INSTRUCTOR _____ DATE