

ENCORE DCS 2010 Grand Finals Entry Form

Grand Finals Location (Please circle one): Buffalo, New York OR Southport (Sunset Beach) North Carolina

Studio Name _____ Studio Director _____

Studio Mailing Address _____

City/State/Zip _____ Email Address: _____

Studio Phone # _____ Cell/Home # _____ Fax # _____

Title of Entry (Music) _____

____ Recreational Division ____ Competitive Division ____ Pro – Am Division

Performance Category : ____ TAP ____ JAZZ ____ BALLET ____ POINTE
____ LYRICAL ____ CLOGGING ____ OPEN ____ POM POM ____ SONG & DANCE
____ CHARACTER ____ GYMNASTICS ____ FOLKLORIC ____ MODELING ____ MODERN
____ MUSICAL THEATER ____ LITURGICAL ____ HIP HOP ____ VOCAL ____ BATON
____ COSTUME COMPETITION

Age Division: {Please check one based on rules and average age calculated on back of entry form}

Petite: ____ 6 & under ____ 7-8 *Junior:* ____ 9-10 ____ 11-12 *Teen:* ____ 13-14
Senior: ____ 15-16 ____ 17-18 *Elite:* ____ 19-24 ____ 25-39 ____ 40 & up

Group Division: ____ Solo ____ Super Solo contender (student is performing 2 solos)
____ Duet/Trio ____ Small Group {4-9 dancers} ____ Large Group {10-16 dancers}
____ Super Group {17 or more dancers} ____ Production {unlimited dancers}

Entry Fees	# of Participants**	Amount Enclosed
\$85 - Solo Fee	_____	_____
\$25 - Costume Competition	_____	_____
\$40 per dancer for Duet/Trio	_____	_____
\$30 per dancer for each Group	_____	_____
\$28 per dancer for each Production	_____	_____

** Please list each participant's name, age, and birth date on back of application. Copies of each student's birth certificates must be available at competition if requested.

Waiver and Release – All participants give Encore DCS the right to use their photograph or video for advertising or any other commercial use. I hereby waiver all claims for injury, damage, or loss to my person and property and students' during my participation at ENCORE DANCE COMPETITION FOR THE STARS, INC. and release the promoters, directors, and employees of ENCORE DCS from any liability for injury, damage, or loss which may be caused by any act or omission of any of them.

Director's Signature

We accept VISA and MASTERCARD! If paying by credit card, please submit a Credit Card authorization form with your entries or fax it to 803-996-3463. All Entries must be postmarked 28 days prior to competition date.

PLEASE MAIL ALL ENTRY FORMS WITH A CREDIT CARD AUTHORIZATION FORM, BUSINESS CHECK, MONEY ORDER OR CASHIERS CHECK TO: 115 Smith Street
Lexington, SC 29072

FOR MORE INFORMATION: CALL Susan {803} 397-5986 or Rhonda (803) 319-3295 FAX (803) 996-3463
WWW.ENCOREDACS.COM

