BY SUBMITTING THIS ENTRY FORM, I AGREE TO ALL OF THE POLICIES, PROCEDURES, RULES AND REGULATIONS AS SET FORTH BY IDC.

INTERNATIONAL DANCE CHALLENGE
2010 OFFICIAL REGIONAL ENTRY FORM

FOR OFFICE USE ONLY

LIST THE NAMES OF ALL DANCERS COMPETING FROM YOUR STUDIO ON THE DANCER ROSTER PROVIDED. SIGN AND MAKE COPIES. INCLUDE A COPY OF THE DANCER ROSTER FOR EACH ROUTINE, WITH A CHECKMARK IN THE BOX BY THE NAME OF EACH DANCER IN THAT ROUTINE. ALL ENTRIES MUST BE **RECIEVED BY THE DEADLINE DATE OR BEFORE A MAXIMUM NUMBER OF ENTRIES ARE RECEIVED FOR A RESPECTIVE CITY; WHICHEVER OCCURS FIRST.**

ENTRY FEES ARE NON REFUNDABLE

USE ONE FORM PER ENTRY

PRINT OR TYPE LEGIBLY

COMPETITION CITY: _____

JUNIOR AGE DIVISION: ☐ 4 & UNDER ☐ 5 - 6 ☐ 7 - 8 ☐ 9 - 10 ☐ 11 - 12

SENIOR AGE DIVISION: ☐ 13 - 14 ☐ 15 - 16 ☐ 17 - 19 ☐ 20 - 29 ☐ 30 - 39 ☐ 40 & OVER

CATEGORY:

○ FEMALE SOLO....1 DANCER _____ ***SOLOIST NAME / AGE / BIRTH DATE*** 1 X $80 = **$80.00**

○ MALE SOLO.....1 DANCER _____ ***SOLOIST NAME / AGE / BIRTH DATE*** 1 X $80 = **$80.00**

○ DUO - TRIO.....2-3 DANCERS ($90 PER ENTRY) 2 OR 3 DANCERS = **$90.00**

○ SMALL GROUP....4-7 DANCERS ($33 PER DANCER) # OF DANCERS____ X $33 = _____

○ LARGE GROUP....8-14 DANCERS ($30 PER DANCER) # OF DANCERS____ X $30 = _____

○ LINE.....15 OR MORE DANCERS ($30 PER DANCER) # OF DANCERS____ X $30 = _____

○ PRODUCTION.....4 OR MORE DANCERS ($30 PER DANCER) # OF DANCERS____ X $30 = _____

SUBJECT/STYLE (CHOOSE ONLY ONE): ◇ ACRO/GYM ◇ CLASSICAL BALLET ◇ CONTEMPORARY BALLET ◇ CLOGGING ◇ DANCE TEAM ◇ ETHNIC/FOLKLORIC ◇ HIP HOP ◇ JAZZ ◇ LYRICAL ◇ MODERN/ABSTRACT ◇ MUSICAL THEATRE/CHARACTER ◇ OPEN ◇ CLASSICAL POINTE ◇ CONTEMPORARY POINTE ◇ TAP

☐ **SUPPLEMENTARY** (CHECK ONLY IF APPLICABLE)

☐ **PARENT / ADULT** (CHECK ONLY IF APPLICABLE)

☐ **PROFESSIONAL / PRO-AM** (CHECK ONLY IF APPLICABLE)

NAME OF ROUTINE: _____ ROUTINE LENGTH: ____ **MINUTES** : ____ **SECONDS**

STUDIO/INDEPENDENT NAME: _____

STUDIO/INDEPENDENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

STUDIO/INDEPENDENT PHONE: (____) _____ HOME PHONE: (____) _____

CELL PHONE: (____) _____ FAX NUMBER: (____) _____

E-MAIL ADDRESS: _____ STUDIO OWNER'S NAME: _____

(DO NOT LIST TEACHER NAMES)

ENTRY PREPARER: _____ ENTRY PREPARER NUMBER: (____) _____

MAIL OR FAX ENTRIES ALONG WITH THE ENTRY SUBMISSION FINAL CHECK LIST AND CORRECT ENTRY FEES IN U.S. FUNDS TO: INTERNATIONAL DANCE CHALLENGE, 2929 EAST COMMERCIAL BLVD., SUITE 306, FT. LAUDERDALE, FL 33308 or FAX 1-800-658-8959
QUESTIONS??? Call 1-800-797-2145 M-F 9am-5pm EST, write: info@intldancechallenge.com or visit www.intldancechallenge.com