



Gotta Move!

Solo, Duo, Trio 2012 Competition Entry Form
to register on-line, go to www.GottaMoveCompetitions.com
Make Additional copies of this form as needed. Only one dance routine per form.



Check box to indicate which competition you wish to enter.

- SYRACUSE HIGH SCHOOL – Fri. March 9th (entry deadline Jan 28th) 665 S. 2000 W. Syracuse UT
- MAPLE MOUNTAIN HIGH SCHOOL – Fri. April 27th (entry deadline Mar 17th) 51 N. 2550 E. Spanish Fork
- PROVO HIGH SCHOOL – Fri. May 4th (entry deadline March 17th) 1125 N. University Ave. Provo, UT

★ This dance routine is a: Solo ___ Duo ___ Trio ___

Names:

Dancer #1 _____ M/F ___ Age ___ Birthdate ___/___/___ Phone(____) _____

Dancer #2 _____ M/F ___ Age ___ Birthdate ___/___/___ Phone(____) _____

Dancer #3 _____ M/F ___ Age ___ Birthdate ___/___/___ Phone(____) _____

Address _____ City _____ State _____ Zip _____

Legible Email Address _____

Studio Name _____ Studio Phone _____

Studio Director _____ Routine Choreographer _____

CIRCLE DANCE CATAGORY:

Jazz, Character, Lyrical,
Contemporary, Ballet,
Pointe, Hip Hop, Open
Tap, Cheer, Ballroom,

SKILL LEVEL:

___ Novice: Very beginning dancer. Single Pirouette, Chaines, Grande Jete

___ Beginning: Double Pirouette, Pique Turns, Side Leaps, Beginning dance moves

___ Intermediate: Triple Pirouette, Fouettes, Switch Leaps, Average/good technique & flexibility

___ Advanced: Multiple/Directional Fouettes, Specialty Turns/Leaps. Good/excellent technique & flexibility



★ SONG NAME: _____

Any routine that the judges feel is NOT entered in the appropriate skill level (Nov, Beg, Int, Adv) will be judged and awarded in the appropriate skill level division (not the level originally entered in). For skill level questions, please consult your coach.

In Consideration of your accepting this entry, I hereby, for myself, my child, my heirs, executors, and administrators, waiver and release any and all rights and claims for damages I or my child may have against Gotta Move LLC, venue owners or affiliates, their representatives, successors and assigns, for any and all injuries suffered by myself at any activity sponsored by these groups.

Parent of Dancer #1 _____

Parent of Dancer #2 _____

Parent of Dancer #3 _____

(Signatures of legal guardians of participants) (Date)

Submit entries to:
Gotta Move!
96 S. 2120 W.
Provo, UT 84601

★ Phone: (801)360-1115 ★
Fax: (801)373-5584
Email: GottaMoveCompetitions@Gmail.com
www.GottaMoveCompetitions.com

Check our website for
competition line-up information

Payment in full must accompany all entry forms

Solo - \$45
Duo - \$35 per dancer (\$70 total)
Trio - \$35 per dancer (\$105 total)
Late Fee - \$10 per dancer when postmarked after entry deadline. Entry fees are non-refundable after the deadline.
Pay by Check, Visa, MasterCard, Discover

Card # _____ - _____ - _____

Exp. Date ___/___/___ Amount \$ _____

Signed _____

(Card holder's signature)

A 3% bank processing fee will be added to all electronic payments. Charges titles "Dance Performance" will appear on your financial statement