Team Competition Registration Form 2020

(check appropriate box)

- **PEERY EGYPTIAN THEATER - Stage** March 6/7 (early bird date Jan 6th) 2415 Washington Blvd. Ogden UT.
- **UTAH VALLEY UNIVERSITY - Gym** March 20/21 (early bird date Jan 20th) 800 W University Pkwy, Orem, UT
- **MAPLE Mtn H.Sch. – Stage/Gym** April 3/4th (early bird date Mar 3rd) 51 N. 2550 E. Spanish Fork
- **JUAN DIEGO H.Sch. – Stage/Gym** April 17/18 (early bird date Feb 17th) 300 E. 11800 S. Draper UT.
- **TAYLORSVILLE H.S. – Stage/Gym** May 1/2 (early bird date Mar 1st) 1450 N. 200 E. Orem, UT
- **PROVO HIGH Sch. – Stage/Gym** May 15/16 (early bird date Mar 15th) 1199 Lakeshore Dr. Provo UT

Circle Venue Preference: Stage Gym (All show productions numbers will be in the gymnasium. Venue Preference will be honored until venue is full on a 1st come, 1st serve basis.)

Studio Name:_____Best Phone (_____)_____

Directors Name:_____Alt. Phone (_____)_____

Mailing Address_____City_____State____Zip_____

Email Address:_____

Any routine that the judges feel is NOT entered in the appropriate skill level (Beg, Low Int, High Int, Adv, will be judged and awarded in the appropriate skill level division (not the level originally entered in).

Name of all classes participating in this dance to allow costume change time.	Title of Routine	Beg, L Int, H Int, Adv	Ave Age	Dance Style (see list below)	Routine Time	# of Dancers

Names of teachers for free entry

1.
2.
3.
4.
5.
6.

Total Number of Dancers attending for participation awards. (Count each dancer only once)

#Girls_____#Boys _____

Reminder: Studios submitting less than $400 in team entry fees will receive a handsome plaque award instead of the large trophy.

Total the numbers of dancers in the last column_____

Multiply by $16 ($14 if registering early-bird)_____

Individual Trophies desired_____x$10 each=$_____

(All dancers will receive a participation medal. Trophies are optional)

Studios remitting less than $350 (not including individual trophies) who desire the large team trophy, please indicate here by adding the outstanding balance. $_____

Total Monies Remitted $_____

Pay by Check, Visa/MC/Discover#_____-_____-_____-_____CVV#_____

Exp. Date_____/_____ Zip Code for Card _____

Card Holders signature_____

Everyone participates at his or her own risk. Gotta Move Inc. and its organizers, staff or venue representatives are not responsible for any injuries incurred, and your participation implies consent. Photographs of participants by any Gotta Move Inc. staff become the property of Gotta Move Inc, and may be used for future publicity. I accept full financial liability for any damages done to the performing floor caused by our props.

Signature of Director:

Dance Styles:
Jazz, Character, Lyrical, Contemporary, Ballet, Pointe, Hip Hop, Ballroom, Open/Acro Cheer, Tap/Clog (stage only), Lg. Tm, Prod. (styles may be combined in an "Open" category to provide a competitive experience.)

Please Make copies of this form as needed for additional entries

Submit forms and pmts to:
Gotta Move!
765 E. 3750 N.
Provo, Ut 84604
Phone: 801-360-1115

Email: GottaMoveCompetitions@gmail.com
Website: www.GottaMoveCompetitions.com