



ART OF MOVEMENT DANCE CONVENTION

MAIL TO:
1900 E 27th ST #104
Signal Hill, CA 90755

ONLINE REGISTRATION:
ARTOFMOVEMENT.DANCE

CALL:
562.275.2032

PLEASE PRINT

EVENT CITY _____

STUDIO NAME _____

CONTACT NAME _____

PHONE _____

Routine Title

Choreographers' Name _____

Age Division (check box)
All ages are as of January 1, 2018. Drop the decimal point when averaging ages.

- Mini (9 & under) Junior (10-12) Teen (13-15)
 Senior (16-18) ProAM (19+)

Performance Division

- Ballet Lyrical
 Contemporary Musical Theater
 Jazz Open
 Hip-Hop/Jazz Funk Tap

2017-2018 GROUP SHOWCASE & SOLO SCHOLARSHIP FORM

ENTRY FEE (one entry at a time)

DIVISION	FEE PER DANCER EARLY BIRD/REGULAR RATE	NO.OF DANCERS	TOTAL FEE
Solo	\$100/\$110	x	_____ \$
Duet/Trio	\$55/\$65	x	_____ \$
Small Group (4-9)	\$40/\$50	x	_____ \$
Lrg. Group (10-19)	\$40/\$50	x	_____ \$
Line (20+)	\$40/\$50	x	_____ \$
Production (20+)	\$40/\$50	x	_____ \$

TOTAL SHOWCASE/SOLO FEES \$ _____

PRINT EACH PERFORMER'S NAME AND ALPHABETIZE

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____
- 11) _____
- 12) _____
- 13) _____
- 14) _____
- 15) _____
- 16) _____
- 17) _____
- 18) _____
- 19) _____
- 20) _____
- 21) _____
- 22) _____
- 23) _____
- 24) _____
- 25) _____

PAYMENT

Please send one check for Workshop and Showcase/ Solo Competition fees. Entry fees are non-refundable. Bank money orders in US funds only. All checks returned from bank will incur an additional \$35 charge. All credit card reversals will incur an additional 2.5% charge of the original transaction. If outstanding invoices are sent to an outside collection agency, the invoice will incur an additional 25% of the original invoice or the maximum permitted by state law.

- I have enclosed a check or money order in US dollars payable to:
Art of Movement
- Visa Mastercard American Express Discover

Name on Card _____
Card Number _____
Exp. Date _____
Amount _____
Signature _____
Billing Address _____