



Dance-Out 2012 National Competition

COMPETITION STATE _____

COMPETITION CITY _____ COMPETITION DATE _____

STUDIO NAME _____ TEACHER/DIRECTOR _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

STUDIO PHONE # _____ HOME PHONE # _____ FAX # _____

STUDIO E-MAIL ADDRESS _____

OTHER E-MAIL ADDRESS _____

CATEGORIES

____ ACRO/DANCE

____ BALLET

____ MUSICAL THEATER

____ FOLKLORIC

____ HIP HOP

____ JAZZ

____ LYRICAL

____ MODERN

____ OPEN

____ CONTEMPORARY

____ POINTE

____ POM/DRILL

____ PRO-AM (Professional-Amateur)

____ T/S (Teachers and Students)

____ TAP

____ NOVELTY

____ STUDENT CHOREOGRAPHY

DIVISIONS

SOLO - \$80 X ____ = ____

DUO/TRIO - \$110 PER ROUTINE X ____ = ____

SMALL GROUP (4-9) - \$32 PER PERSON X ____ = ____

LARGE GROUP (10-18) - \$32 PER PERSON X ____ = ____

LINE/PRODUCTION (19-UP) - \$32 PER PERSON X ____ = ____

SOLO TITLE - \$95 PER PERSON X ____ = ____

TOTAL = _____

AVERAGE AGE/DIVISION _____

____ Mini Petite ____ Petite ____ Junior ____ Teen ____ Senior

NAME OF ROUTINE _____

CHOREOGRAPHER _____

PAYMENT BY - (CHECK) _____ (MONEY ORDER) _____

TOTAL ENTRY FEE; _____

TEACHER/DIRECTOR

SIGNATURE; _____

ENTRY FEE TOTAL _____

PLEASE CHECK

NOVICE/RECREATIONAL

DANCE OUT COMPETITION
P.O. Box 1327
LIBERTY, MISSOURI 64069
(816) 415-8488
danceoutcompetition@vahoo.com



Dance Out Competition
563 Hawthorne Drive, Liberty, Missouri 64068
(816) 415-8488

AS AN AGENT AND/OR REPRESENTATIVE OF THE PERFORMERS LISTED ON THIS FORM AND/OR ATTACHED SHEET. I HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS DANCE OUT COMPETITION. ITS MEMBERS, EMPLOYEES, AGENTS AND REPRESENTATIVES/JUDGES FROM ANY AND ALL CLAIMS, SUITS AND ACTIONS, LIABILITIES, COURT COSTS AND LEGAL FEES RESULTING FROM ANY DAMAGE, INJURY OR ILLNESS TO ANY CONTESTANT, PARTICIPANT OR ATTENDEE AT ANY DANCE OUT COMPETITION EVENT. THE TIME LOCATION IS SOLELY UNDER THE DISCRETION OF DANCE OUT COMPETITION. IN ADDITION, THE UNDERSIGNED HAS READ AND AGREES TO ABIDE BY ALL RULES AND REGULATIONS SET FORTH BY DANCE OUT COMPETITION.

AUTHORIZED LEGAL REPRESENTATIVE/DIRECTORS;

Date;

PERFORMER	BIRTH DATE	AGE	PERFORMER	BIRTH DATE	AGE
1. _____			26. _____		
2. _____			27. _____		
3. _____			28. _____		
4. _____			29. _____		
5. _____			30. _____		
6. _____			31. _____		
7. _____			32. _____		
8. _____			33. _____		
9. _____			34. _____		
10. _____			35. _____		
11. _____			36. _____		
12. _____			37. _____		
13. _____			38. _____		
14. _____			39. _____		
15. _____			40. _____		
16. _____			41. _____		
17. _____			42. _____		
18. _____			43. _____		
19. _____			44. _____		
20. _____			45. _____		
21. _____			46. _____		
22. _____			47. _____		
23. _____			48. _____		
24. _____			49. _____		
25. _____			50. _____		

Release and Waiver Form

Every Participant must have a completed and signed release form turned in prior to the first day of the event to participate.

Minor's Participant Name _____	Name of Parent/Legal Guardian _____	Competition City _____
Address _____	Studio Name _____	Competition Date _____
City, State & Zip _____	Studio Address _____	
Phone Number _____	Studio City, State & Zip _____	
This Form May Be Duplicated _____	(____) _____	Phone Number _____

Liability Release. For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged. I _____, as parent or legal guardian of _____, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the competition (hereinafter "Event"), to be conducted by Dance Out Competitions. I, in my own behalf and on behalf of the minor, further agree to release and hold harmless Dance Out, the Hosting site, (University, hotel, convention center, high school) on whose premises the Event will occur (hereinafter the "Location") the affiliates of Dance Out and the Location, and the respective directors, officers, representatives, members, agents and employees of Dance Out, the Location and their respective affiliates (hereinafter collectively "Releasees") from any and all liability for negligence or any other claim judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any other claim judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic, and/or death) that the Minor may incur or sustain during the Event, all activities associated with the Event and while traveling to and from the site for the Event whether or not the Event actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss, damages, or costs Releasees may have to pay as a result of any such action, claim, or demand.

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents.

I, in my own behalf and on behalf of the Minor, am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of the Minor, further acknowledge that nothing in the Liability Release constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian: X _____ Date: _____

Medical Release. I, in my own behalf and on behalf of the minor, acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury (minimal, serious, catastrophic and/or death) and that I, in my own behalf and on behalf of the Minor, acknowledge that the Minor is assuming the risk of such illness or injury by participant in the event. In the event of such illness or injury, I authorize Dance Out or Chaperone to obtain necessary medical treatment for the minor and hereby, in my own behalf and on behalf of the Minor, release and hold harmless Releasees in the exercises of the is authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of the Minor for any illness or injury that the Minor may sustain during the Event and while traveling to and from the site for the Event whether or not the Event actually occurs.

Appearance Agreement. I understand that Dance Out from time to time produces promotional material relating to its programs. I understand that as a participant and/or a spectator at the Event that Minor may be included in videotapes or photographs taken during the Event. Therefore, without reservation or limitations, I, in my own behalf and on behalf of the Minor, hereby assign, transfer and grant to Dance Out, its successors, assignees, licenses, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape the Minor and to utilize such videotapes and photographs and Minor's name, face likeness, voice and appearance as a part of the Event, in advertising and promoting the Event or in advertising and promoting similar future events. I further understand that neither Dance Out nor any third party is under any obligation to exercise any of the foregoing rights, licenses and privileges.

Event Rules. I further acknowledge and understand that Dance has established rules and regulations pertaining to conduct, behavior and activities of all Event participants, by which Minor and I agree to abide during the Event (copy of which is listed on the below of this form and in accompanying brochure), and that Minor and I will be responsible for his/her/my failure to abide by those rules and regulations. Minor and I have received, read and understand the Event rules.

Supervision. A Chaperone/Adult (age 21 or older) is required to attend with participants. This Chaperone will be responsible for the participants at all times. Dance Out is not responsible for participants' supervision.

Emergency Information:	Name: _____	Address: _____
	City, State, Zip: _____	Cell Phone (____) _____
	Daytime Telephone: (____) _____	Evening Phone (____) _____

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents. I, in my own behalf and on behalf of the Minor, am aware that this Participant Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of the Minor, further acknowledge that nothing in this Participant Release and Waiver Form constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian: X _____ Date: _____

Relationship to Minor: _____

I, identified above as Minor, acknowledge that I have read this Release and Waiver From.

Signature of Minor: X _____ Date: _____