



## REGISTRATION 2017

### COMPETING Studio Performers

**DEADLINE** for return of all completed performer & seminar registration forms, including seminar payment, to secure placement in the performance schedule is: **June 11, 2017.**

Please ensure all forms are filled out **completely**. Incomplete forms **will not** be considered to secure a spot in the performance schedule.

#### **Requirements & Deadlines:**

- All Competition acts representing the Isis Studio **MUST BE APPROVED**
- Both legal names and performer/dance names are required for all contestants/participants.
- **DEADLINE** to return all completed performer & seminar registration forms, including seminar payment, to secure placement in the performance schedule: **JUNE 11, 2017.**

#### **Select your Competition Category:**

- **Check or Circle the box** above the name of the category in which you would like to compete.
- By selecting a category, you agree that you, or you & your group, meet the qualifications described therein:

**We / I wish to compete in the following category/categories**

                                                                                      

Competition Categories	Rising Star Solo	Tribal/Fusion Professional Solo	Duet/Trio	Cabaret Professional Solo	Troupe
Maximum Performance **Time Allowed	4 mins	5 mins	5 mins	5 mins	7 mins
Competition Day	Thursday	Thursday	Thursday	Friday	Friday
Performance Style Allowed	Tribal/Fusion or Cabaret	Tribal/Fusion Only	Tribal/Fusion or Cabaret	Cabaret Only	Tribal/Fusion or Cabaret
Contestant Experience Level Requirements	Under 5 years of experience in dance and/or pre-professional, non-restaurant performer, a non-teacher	5 years or more dance experience and/or teacher and/or paid professional, restaurant performer	2 to 3 performers. Any length of time dancing or experience level.	5 years or more dance experience, and/or teacher and/or paid professional, restaurant performer	4 or more performers. Any length of time dancing or experience level.
Registration Requirements (for each participant)	1 full day of dance/drum workshop	1 full day of dance/drum workshop	1 full day of dance/drum workshop	1 full day of dance/drum workshop	1 full day of dance/drum workshop

LEGAL NAME: \_\_\_\_\_

PERFORMER/DANCE NAME : \_\_\_\_\_

YOUR ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**Prop Usage:** Please give us information about props you will use during your performance by **checking the appropriate boxes below.**

- |   |   |
|---|---|
| <input type="checkbox"/> Cane<br><input type="checkbox"/> Fan Veil<br><input type="checkbox"/> Sword<br><input type="checkbox"/> Other - If other, please describe: _____ | <input type="checkbox"/> Veil<br><input type="checkbox"/> Wings<br><input type="checkbox"/> Zills |
|---|---|

**Please read the Policies & Procedures available online, then read and sign this statement in the space provided below:**

I have read and agree to all policies and procedures and I do hereby release *Isis, Isis Productions, Isis and the Star Dancers, Isis' Star Dancer Studio, "Yaa Halla, Y'all - A Gathering of the Stars in Texas,"* their agents and employees, the Grapevine Convention Center and the City of Grapevine, its agents and employees from any and all claims for any kind of damages or injuries received while participating in *July 27,28,29 & 30, 2017 "Yaa Halla, Y'all - A Gathering of the Stars in Texas"* Classes, Activities or Performances. I/We also understand that my/our performance(s) will be videotaped and available for me/us to purchase.

**SIGNATURE for SOLO :** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**TROUPE or GROUP**

**NAME:** \_\_\_\_\_

**PRIMARY CONTACT for GROUP NAME:** \_\_\_\_\_

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(1) Group/Troupe Member LEGAL NAME: \_\_\_\_\_  
Group/Troupe Member PERFORMER/DANCER NAME : \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
**Signature (required):** \_\_\_\_\_

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(2) Group/Troupe Member LEGAL NAME: \_\_\_\_\_  
Group/Troupe Member PERFORMER/DANCER NAME : \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
**Signature (required):** \_\_\_\_\_

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(3) Group/Troupe Member LEGAL NAME: \_\_\_\_\_  
Group/Troupe Member PERFORMER/DANCER NAME : \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
**Signature (required):** \_\_\_\_\_

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(4) Group/Troupe Member LEGAL NAME: \_\_\_\_\_  
Group/Troupe Member PERFORMER/DANCER NAME : \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
**Signature (required):** \_\_\_\_\_

*Please reprint this page for any additional members of Troupe / Group*