PLATINUM Performing Arts Competition

ppacomp@hotmail.com P.O. Box 388 Tel: 1-888-75-PLATINUM

**www.ppacomp.com** Bridgewater, MA 02324 Fax: 1-888-757-5284

**PLATINUM Performance Dancer Registration**

At each of our regional competitions, outstanding entries will be chosen by the judges to be members of the Platinum Dancer Mini, Junior and Senior Dance Teams. Those chosen will have an opportunity to perform exciting new choreography from our professional choreographers to open and close at our National Competition. Those students registering and accepting the opportunity to be Platinum Performance Dancers, will receive the following:

* Unique choreography for Platinum Dancer Performance



* Unique costume designed for the team



* One of a kind Platinum Practice Dancewear



* Question and answer session with our dance professionals



* Opportunity to model the Platinum Dancewear



* Feature spots in our print ads and on our website



* Exclusive special events



* Memories to last a life time

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# PLATINUM DANCER Registration

STUDIO NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEVEL OF DANCER\_\_\_\_\_\_\_\_AGE\_\_\_\_\_\_\_\_\_\_\_\_\_\_MALE/FEMALE\_\_\_\_\_\_\_\_\_\_

## Specialty style of dance\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*Measurements:**

### BUST\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SHIRT SIZE \_\_\_\_\_\_\_\_\_\_\_\_\_ WAIST\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SHORTS SIZE \_\_\_\_\_\_\_\_\_\_\_ HIPS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GIRTH\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### IN SEAM\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HEIGHT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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### Total for this program is **$240.00**

**Please send this is registration form with $100.00 deposit by June 1st to:**

**Platinum Performing Arts Competition**

**PO Box 388**

**Bridgewater, MA 02324**

**\*\*FINAL PAYMENT IS DUE BY JULY 1st**

**\*\*\*Or Fax info and payment to 1-888-757-5284 \*\* See Payment Sheet**

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#### PLATINUM DANCER PAYMENT SHEET

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

**STUDENT’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*Or Fax info and payment to 1-888-757-5284**

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| **PLATINUM PERFORMING ARTS COMPETITION**  **DISCLAIMER**  All performers and competitors give Platinum Performing Arts Competition permission to use their photographs, videos and/or likeness in any of our promotional efforts without compensation. By signing the entry form for **Platinum Performing Arts Competition**, all dancers and competitors assume responsibility for personal property and injuries incurred at the competition. Injuries include, but are not limited to, sprains, muscle pulls and bone breaks. Your signature and participation indicate acceptance of these responsibilities. **Platinum Performing Arts**  **Competition Directors and Staff assume no responsibility for personal injury or property loss.**    ***x***  Signature | **Credit**    **Card**    Credit Card Authorization \*No    Refunds\*    Charge Total $            Credit Card    Number    CIRCLE    ONE    Expiration    Security    Code    Billing Zip    Code              Card Holder’s Name (Please    Print)    **X**  Card Holder’s Signature  The above signed card member agrees to perform the obligations set forth in the card member’s agreement with the issuer. This form acknowledges receipt of goods and/or services in the total amount shown above. |