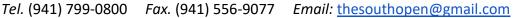
Professional Entry Form





StudioStreet	
City / State	
Fmail	
LEADERS'S INFORMATION	FOLLOWER'S INFORMATION
Name (Dance)	Name (Dance)
(Legal)	(Legal)
NDCA No.	NDCA No.
(Substitute CDTA, etc. Where Applicable)	(Substitute CDTA, etc. Where Applicable)
Address (Home)	Address (Home)
Phone	Phone
Email	Email
Social Sec. No.	Social Sec. No.
SING STAR EVENTS	OPEN EVENTS
☐ Rising Star Smooth 4-Dance	□ Open Smooth 4-Dance
Valtz, Tango, Foxtrot & Viennese Waltz	Waltz, Tango, Foxtrot & Viennese Waltz
Rising Star Rhythm 5-Dance	□ Open Rhythm 5-Dance
ha-Cha, Rhumba, Swing, Bolero & Mambo	Cha-Cha, Rhumba, Swing, Bolero & Mambo
Rising Star Int'l. Ballroom 5-Dance	□ Open Int'l. Ballroom 5-Dance
Valtz, Tango, Viennese Waltz, Foxtrot & Quickstep	Waltz, Tango, Viennese Waltz, Foxtrot & Quickstep
Rising Star Int'l. Latin 5-Dance	□ Open Int'l. Latin 5-Dance
ha-Cha, Samba, Rumba, Paso Doble & Jive	Cha-Cha, Samba, Rumba, Paso Doble & Jive
Rising Star Theatre Arts	□ Open Theatre Arts □ Open Showdance
ndividual routines only.	Individual routines only.
	e Organizer reserves the right to cancel said event or pay half of advertised purses. Entry fee will be sonly available when booked through organizer. Add \$24 per person per night for 3rd and 4th sharir
Hotel sellout anticipated - book early. Member of a partnership not	on package will pay 50% of entry fee. Entry fee includes admission to the ballroom for the sessions i servation at the special rate. For other purchases, please use separate form. If faxing or emailing yo
rival Date Departure Date	
imber of beds required (please circle): 1 2	Total # nights x \$265 = \$
	ney Order Visa Mastercard American Express Credit Card
Card Number	Expiration Date Security Code Billing Address

- 2. Release and hold harmless South Open Championships; and/or the National Dance Council of America, Inc. from all liability to me, my personal representatives, assigns, heirs, and next of kin, and against any claim or cause of action which I, or anyone claiming by, through or under me, may at any time have against those hereby released, arising out of bodily injury (including death) or damage, loss or theft of articles suffered by me while attending this event.
- 3. Consent to the use and release of his/her name and likeness to be used in photographs, television filming and recording of the event used in connection with the television broadcast, exhibition, distribution or promotion of the event in any manner and by and means, now or in the future, by South Open Championships and/or its parent, related, affiliated or subsidiary companies; or the National Dance Council of America, Inc.*
- * If any person has an objection to being video taped or the possibility of being seen on these tapes in any publicity trailers or other use of his or her picture, please notify the organizers of this event in writing 30 days prior to the commencement. Failure to notify will be considered as permission granted.

All persons attending this event shall be bound by the National Dance Council of America, Inc. rules, and by participating in this event, automatically become obligated to adhere to them. In the event of a dispute with the NDCA, it's rules or decisions, I agree to follow all avenues of the appeal available to me within the council. If after all avenues of the appeal have been exhausted and the matter is still unresolved, I hereby agree to submit the dispute to arbitration by an outside arbiter provided by the American Arbitration Association, the site of any such arbitration shall be chosen by the NDCA.

Si	gnature	Date	Email: thesouthopen@gmail.com Fax: 941-704-7613 Mail to: P.O. Box 1674 Sarasota, FL 34230-1674