

**REGISTRATION FORM
RINCON LINE DANCE WORKSHOP**

MAIL ONE FORM PER DANCER)

Make check payable to Carol Bandy.

Mail form & check to:

Carol Bandy, 2451 Walking H Pl, Tucson AZ 85713

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____ Email _____

**NO REFUNDS. TRANSFER ACCEPTED WITH REGISTRATION FORM up to
one week prior to event.**

**List 5 dances (including dance title, choreographer, & level) you
would like to dance during open dance & mail or email to Carol,
postmarked by 1/24/2023.**

	DANCE TITLE	CHOREOGRAPHER	LEVEL
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____

Submission of this form by the party listed below signifies the following: "I myself, & I on behalf of any other duly authorized representatives, agree to hold the organizers of this event & their agents harmless from all suits, claims, or demands of every kind arising out of, & in conjunction with, the event. I hereby authorize the reproduction, sale, copyright, exhibition, broadcast, &/or distribution of any video tape or photographs without limitations. I understand the physical risks of entering dance competition & social dancing & assume full responsibility for injury or personal damage resulting from the event named above. I certify that I am eighteen (18) years of age or older."

SIGNATURE _____ **DATE** _____