Performance Team Registration Form

Organization(s)	Chapter(s)
1	
2	
3.	
Primary Contact Name:	Cell phone:
Social media accounts for organizations:	
Primary Contact Email Address:	
Advisor(s) Name:	
Advisor(s) Phone	Fax
Advisor(s) Email	
Please provide a brief description of your performance:	

Performance Show Agreement Form

All judges will be fair and impartial. The above rules and regulations are final. There will be no exceptions. By signing below, you are agreeing, as team representative, to all the rules and conditions herein and that all will be adhered to by each team member. It is further your understanding that failure to comply with any portion of the aforementioned can result in disqualification or point deduction. A signature on this agreement confirms your team's presence and participation in the show. Failure to comply will result in forfeiture of your entry fee. In witness thereof, the Team Advisor has executed this agreement the day and year indicated below.

All organizations competing must sign form.

Advisor Print Name
Advisor Signature & Date
Performance Team Primary Contact (1) Representative Print Name
Douts were a Toolea Deimon Control (1) Double at the Circulture (1) Date
Performance Team Primary Contact (1) Representative Signature & Date
Performance Team Secondary Contact (2) Representative Print Name
(=)
Performance Team Secondary Contact (2) Representative Signature & Date

Performance Show Deposit Entry Fee and Prize Agreement

We,	(team name) understand that the \$50.00 entry fee deposit is due by	
completion of the show addressed to the contact	m. We understand that the \$50.00 deposit fee will be returned to the team upovia original check/direct deposit or electronic payment form (within 2-3 weeks on the W-9. We understand that if we forfeit for any reason and do not perforn deposit will not be refunded.)
deposit/electronic paym	inning teams will receive and accept prize money in the form of a direct tent. The direct deposit/electronic payment will be made payable to the organization the W-9. Prize money will be distributed in direct deposit/electronic paymerformance.	
Performance Team Prima	ry Contact (1) Representative Print Name	
Performance Team Prima	ry Contact (1) Representative Signature & Date	
	OFFICE USE ONLY	
☐ 1 st Prize \	nce Show Entry Fee Deposit - \$50.00 Vinner- \$1000.00 Vinner- \$500.00	
X		
Armando Riio – Center fo	r Multicultural Engagement and Inclusion	