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 North York, ON
 M3J 2K8
 Tel/Fax: (416) 665-1387
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www.crystalleaf.ca

Pro-Am Single Dance and Solo Exhibition Entry Form

Teacher's Name:		Studio:	
Student's Name:		Phone:	
City:		State/Province:	
Country:		Zip/Postal Code:	
Address:		Email:	

Age Categories (Please use one form for each age group you are entering)

JA (-11)	JB (12-15)	A (16-20)	A1 (21-35)	B (36-50)	B1 (51-60)	C (61-70)	C1 (71+)
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PLEASE SEND YOUR ENTRIES BY FEB 16, 2017 *DEADLINE FOR EARLY BIRD PRICES IS FEB 9th, 2017*

CLOSED LEVEL	SMOOTH	RHYTHM	STANDARD	LATIN	# OF ENTRIES
Newcomer	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Pre-Bronze	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Bronze	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Intermediate Bronze	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Full Bronze	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Pre-Silver	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Intermediate Silver	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Full Silver	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Pre-Gold	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Intermediate Gold	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Full Gold	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____

OPEN LEVEL	SMOOTH	RHYTHM	STANDARD	LATIN	# OF ENTRIES
Open Pre-Bronze	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Open Bronze	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Open Pre-Silver	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Open Silver	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Open Gold	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____
Advanced	W T F VW AT PB	CC R SW B M MER S PD H WCS SAL BCH	W T VW F Q	C S R PD J	_____

Showdance & Solo Exhibitions (Age divisions for Solo Exhibitions are the same as the Single-Dance Events listed above)

Dance	Level (Bronze, Silver, Gold, Advance)	Age	Fees

OPEN PRO/AM SHOWDANCE/CABARET COMPETITION:

NO REFUNDS FOR CANCELLED ENTRIES AFTER THE DEADLINE – FEB 16th, 2017

Acceptance of any entries submitted after the deadline is subject to the organizer's discretion.



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Media Release Form

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We agree that Crystal Leaf International Dancesport Championships and CDF, any of their affiliates, subsidiaries and employees shall be free of any liability or claims arising from the production, exhibition, transmission, distribution or use of said programs.

All reproductions shall be your sole and exclusive property. We hereby release and discharge you of any and all liabilities, claims and demands, suit and actions which we ever had, now have, or may have based upon any agreements herein made. We shall defend, indemnify and hold you harmless from and against any and all claims, demands, losses, suits and expenses relating to this agreement.

This agreement is intended, amongst other things, to fulfill all requirements of the Charter of Rights and Freedoms, and of any and all other restrictions against violations of our expectation of privacy.

"No responsibility for loss or theft of articles left in Changing Rooms, Ballrooms or Hotel Rooms can be accepted by the Crystal Leaf International Dancesport Championships and, neither can they be held liable for injury sustained by persons attending this event. Everyone attending does so at his or her own risk."

"All persons attending Crystal Leaf International Dancesport Championships, whether as spectators, competitors, officials or guests of the organizer, shall be bound by the printed rules and by participating in this event will automatically become obligated to adhere to them."

I declare that I am at least 18 years of age, have read and understood the foregoing statement, and am competent to execute this agreement.

Signature: _____ Signature: _____

Guardian's name (if applicable): _____ Guardian's name (if applicable): _____

Date: _____ Date: _____