



A SUBSIDIARY of Friends and Co. Dance intensive LLC  
 P.O. BOX 220 New York, NY 10116 646-325-4558  
 CONTACTUS@friendsandcodance.com or CALL/text 646-325-4558  
 Submit this form to register, with CHECK, CREDIT CARD PAYPAL or CHASE quick pay

**COMPETITION ENTRY FORM**

**ONE FORM PER ENTRY**

Name of person filling out form (choose one): PLEASE (fill out all blanks with N/A if not applicable)

Studio owner/director \_\_\_\_\_ Studio Name \_\_\_\_\_  
 Parent \_\_\_\_\_ or Student 18+ \_\_\_\_\_  
 Address \_\_\_\_\_ Email \_\_\_\_\_  
 Phone# \_\_\_\_\_ 2nd Phone# \_\_\_\_\_ optional ph. # \_\_\_\_\_  
 Parent(s)/Guardian Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
 ROUTINE TITLE \_\_\_\_\_ CHOREOGRAPHER'S NAME \_\_\_\_\_

*FCODI owners/directors DO NOT IN ANY WAY favor/manipulate any scores or discrepancies regarding scores, placements and awards and use the utmost integrity in all business dealings.*

**Performance Division (check one)**

Ballet\_\_\_ Jazz\_\_\_ Tap\_\_\_ Contemporary\_\_\_ Lyrical\_\_\_ Musical Theatre\_\_\_ Voice\_\_\_ Theater monologue\_\_\_ Open\_\_\_

**AGE DIVISION (check one)**

- SOLOS MINIS                      2 ½-6 \_\_\_\_\_ JUNIORS: 7-12 \_\_\_\_\_ TEENS 13-15 \_\_\_\_\_ SRS. 16+ \_\_\_\_\_
- DUOS/TRIOS                      2 ½-6 \_\_\_\_\_ JUNIORS: 7-12 \_\_\_\_\_ TEENS 13-15 \_\_\_\_\_ SRS. 16+ \_\_\_\_\_
- SMALL groups                    2 ½-6 \_\_\_\_\_ JUNIORS: 7-12 \_\_\_\_\_ TEENS 13-15 \_\_\_\_\_ SRS. 16+ \_\_\_\_\_
- LARGE groups                    2 ½-6 \_\_\_\_\_ JUNIORS: 7-12 \_\_\_\_\_ TEENS 13-15 \_\_\_\_\_ SRS. 16+ \_\_\_\_\_

**ENTRY FEES (FILL ALL THAT APPLIES)**

- SOLOS MINIS                      \$75.00 x # of dancers \_\_\_\_\_ = total SOLOS \_\_\_\_\_
- DUOS/TRIOS                      \$40.00 x # of dancers \_\_\_\_\_ = total DUOS/TRIOS \_\_\_\_\_
- SMALL GROUPS (4-9)              \$40.00 x # of dancers \_\_\_\_\_ = total GROUPS \_\_\_\_\_
- LINE-LARGE GROUPS (10+)      \$40.00 x # of dancers \_\_\_\_\_ = total LINE/LARGE GROUPS \_\_\_\_\_

***All fees must be paid in one payment TOTAL COMPETITION FEES = \_\_\_\_\_***

***TITLE "Most Versatile" (3 solos required for title entries)***

***LOCAL COMPS -Title entries are required to attend previous day 1 day intensive***

***NYC Finals -Title entries are required to attend previous 1 week intensive***



**Please print each performers name (preferably alphabetical order)**

Name: \_\_\_\_\_ Age by Aug. 1<sup>ST</sup> \_\_\_ Date of birth: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_ Age by Aug. 1<sup>ST</sup> \_\_\_ Date of birth: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_ Age by Aug. 1<sup>ST</sup> \_\_\_ Date of birth: \_\_\_/\_\_\_/\_\_\_

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**USE ADDITIONAL FORMS FOR LARGE GROUPS**

**\*Please be prepared to show a copy of birth certificates in case of discrepancy.**

FRIENDS & CO. / LIVE IMPACT DANCE CHALLENGE employs thoroughly trained JUDGES & staff for each competition. The utmost care will be given to all students. However, FRIENDS & CO. / LIVE IMPACT will not be responsible for loss or injury to any student or person attending our events. My child/student is in excellent physical health and physically able to attend FRIENDS & CO. & LIVE IMPACT dance challenge programs. Photography and Media: Friends and Co. reserves the right to include photos/videos of FRIENDS & CO's competitions / events. In signing this form, I give permission for an indefinite period of time for my child/students, (myself if over 18), to be photographed, filmed, and/or interviewed in a FRIENDS & CO's / LIVE IMPACT supervised environment for the sole purpose of promotions for FRIENDS & CO./ LIVE IMPACT program & events. **Please pay all entries at one time.** Total Amount Due: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_ Card# \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ #exp. \_\_\_\_/\_\_\_\_

Billing Address \_\_\_\_\_

**NO refunds.** Credits may be applied to additional programs per Director's approval only. In the unlikely event intensive / competition and or other programs are cancelled by FCO/LIDC, full refunds will be granted within 4 weeks of cancellation. You may send via email/text/fax a picture of your registration form to secure registration.

**I have read, understand, and agree to this entire form, the LIDC rules & regulations...**  
X \_\_\_\_\_

# LIVE IMPACT

DANCE CHALLENGE

Name: \_\_\_\_\_ Age by Aug. 1<sup>ST</sup> \_\_\_ Date of birth: \_\_\_/\_\_\_/\_\_\_

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