

Participation Form

Chachachainc@gmail.com

Please include W9'S & NDCA #'s for Pro's

Studio/Name: _____

City/State: _____

Contact #: _____

Email: _____

Youth Guardian Signature: _____

Deadline Rules-

Hotel Reservations- Feb 15th

Entry Deadline- Feb 22nd

\$300 deposit due with participant form 80% of payment due- Feb 22nd 100% of Payment due- March 1st



PARTICIPANT	<p>Name: _____</p> <p>Student <input type="checkbox"/> Spectator <input type="checkbox"/> Professional <input type="checkbox"/> NCDA# _____</p> <p>Sign below to agree to all release information and competition rules and regulations.</p> <p>Signature: _____</p> <p>All competing pro's must have a valid NDCA Number and return a w9 with this form.</p> <p>Allergy Or Diet Needs: _____</p>	<p>Arrive: _____ Depart: _____</p> <p>Room: <input type="checkbox"/> Single <input type="checkbox"/> Double</p> <p>Roommate(s): _____</p> <p><input type="checkbox"/> VIP: Thurs – Sat Night Hotel</p> <p><input type="checkbox"/> Ultimate: Fri. & Sat Hotel <u>Only</u></p> <p><input type="checkbox"/> Premier A: Fri. Night Hotel <u>Only</u></p> <p><input type="checkbox"/> Premier B: Sat. Night Hotel <u>Only</u></p> <p><input type="checkbox"/> Deluxe: No Hotel 2 day Package</p> <p><input type="checkbox"/> Standard A: No Hotel 1 day Fri <u>Only</u></p> <p><input type="checkbox"/> Standard B: No Hotel 1 day Sat <u>Only</u></p>
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THIS FORM IS VERY IMPORTANT! It must accompany all entry forms. Information provided will be used for ordering awards, reserving accommodations, as well as filing taxes. Please verify all information, particularly, the spelling of each participant's name.