

People's Choice DanceSport Competition

SCHOLARSHIPS & WORLD PRO-AM DANCESPORT SERIES					
AGE CATEGORIES					
A – 18-35	B – 36-50	C – 51-64	S (Senior) – 65+		
PRO-AM BRONZE/SILVER CLOSED SCHOLARSHIPS					
Student Name (Please Print)	Age	Smooth (W, T, FT)	Rhythm (CC, R, ECS)	Standard (W, T, Q)	Latin (CC, R, J)
	A B C S				
	A B C S				
	A B C S				
	A B C S				
	A B C S				
PRO-AM OPEN SCHOLARSHIPS					
Student Name (Please Print)	Age	Smooth (W, T, FT, VW)	Rhythm (CC, R, ECS, B, M)	Standard (W, T, VW, FT, Q)	Latin (CC, S, R, PD, J)
	A B C S				
	A B C S				
	A B C S				
	A B C S				
	A B C S				
WORLD PRO-AM DANCESPORT SERIES					
Student Name (Please Print)	Age	Smooth (W, T, FT, VW)	Rhythm (CC, R, ECS, B, M)	Standard (W, T, VW, FT, Q)	Latin (CC, S, R, PD, J)
	A B C S				
	A B C S				
	A B C S				
	A B C S				
	A B C S				
AMERICAN SMOOTH & INTERNATIONAL STANDARD					
W=Waltz	T=Tango	FT=Fox Trot	VW=Viennese Waltz	Q=Quickstep	
AMERICAN RHYTHM & INTERNATIONAL LATIN					
CC=Cha Cha	R=Rumba	ECS=East Coast Swing	B=Bolero	M=Mambo	
S=Samba	PD=Paso Doble	J=Jive			

All persons attending this event, whether as spectator, competitor, or official, shall be bound by the rules for participating in this event, and shall automatically become obligated to adhere to them. People's Choice DanceSport Competition and participating studios accept no responsibility for any loss or theft of articles left in the changing rooms, ballroom, or hotel rooms or for any loss or injury sustained by persons attending this event; everyone does so at his or her own risk. The undersigned hereby expressly and irrevocably waives any claim or claims arising from any loss or injury occurring at this event. No video taping will be allowed; however, a professional video production company will be on hand to record your dancing. Tapes will be made available for purchase. Your signature below constitutes your consent and understanding of this waiver (parents must sign if participant is under the age of 18).

Student _____ Man Lady Student _____
 Teacher's Name _____ Teacher's SSN _____ NDCA # _____
 Studio Name _____
 Phone _____ Fax _____ email _____
 Address _____ City _____ State _____ Zip _____

DEADLINE: April 16

MAKE ALL PAYMENTS TO: **Forrest Vance Productions, Inc.**

Mail payment with all completed forms to:

Bonnie MacKenzie, 9927 Indian Key Trail, Seminole, FL 33776

Entries may be faxed to: 1-727-245-6808

QUESTIONS – Call Bonnie: Telephone: 1-727-470-9863 Cell Phone: 1-561-901-9834

www.peopleschoicedancesport.org