

PARENT/GUARDIAN SIGNATURE:_____

AUSTRALIAN TEACHERS OF DANCING LTD

ACN 051 244 510 ABN 39 051 244 510

ENTRY FORM FOR STATE JUNIOR TAP CHAMPIONSHIPS

ENTRANT'S NAME:	D.O.B/
STUDIO OWNER/S NAME:	
ACADEMIC SCHOOL CURRENTLY ATTENDING:	
Bronze Medal Bronze Star Silver Medal Silver Star with Highly Commended or higher Gold Medal with Highly Commended or higher Gold Star 3. Competitor must have been studying with the studio of enrolled and participating in classes at the school stated on the Championships. *Refer to State and National Championship R 4. The Championship entry form must be signed by the saccompanied by the following: a) Copy of birth certificate/extract, passport or other legal	(Qualifying) (Qualifying) (Qualifying) (Qualifying) where listed above for the previous Calendar year. The Competitor must be a entry form in order to perform on the day of either the State or National fules located in the Championships section of the website studio owner, the competitor and their parent/guardian and must be all document;
b) Copies/A.T.O.D. computer printouts of all examination	results required for the entry qualification as above.
NO ENTRIES WILL BE ACCEPTED WITHOUT THESE SUBMISSIONS Closing date for all entries is 5.00 p.m. 1st May of each year. NO LATE ENTRIES WILL BE ACCEPTED.	
DRESS REQUIREMENTS Please refer to ATOD Championships Class Uniform requirements document available on the ATOD website Events Page: https://www.atod.net.au/events/ DANCE REQUIREMENTS 1. All competitors will participate in an unseen class prior to the stage performance. 2. The competitors will perform one solo on stage in costume - 3 minute maximum a. This includes but not limited to Traditional and Street styles. Music with or without lyrics may be used. b. Routine may be of any tempo i.Please note that there are to be no tapping sounds in the musical accompaniment, but vocals in the music may be used.	
whatsoever. The Adjudicators decision is final and no corresponde All competitors participate in the Championships at the I give permission for ATOD to use my / my child's / stepromotional activities that may arise from time to time for ATOD child's / student's photograph / images. Studio Owners agree to accept responsibility to have will attend to the matter and forward an invoice for the cost of	eir own risk. udent's photograph / images, without payment or reward, for ATOD D. I do not require ATOD to consult with me prior to the use of my / my trophy/shield engraved and understand that where this is not done ATOD the engraving to the Studio Owner requesting payment
I HAVE BEEN INFORMED OF THE STATE CHAMPIONSHIP RULES AND AGREE TO BE BOUND BY THEM. THIS ENTRY IS IN ACCORDANCE WITH THE RULES.	
ENTRANT'S SIGNATURE:	
STUDIO OWNER'S SIGNATURE:	/

DATE:____/___/__