

Windy City Line Dance Mania

October 10 -13, 2019 ~ Registration Form ~ Please use one form per address!

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|-------------------------|----------------------------|
| Dancer 1 Name: | City: |
| Dancer 2 Name: | State/Zip/Province/ |
| Email (Dancer 1) | Country: |
| Email (Dancer 2) | Comments: |

| Item & Description | Before 4/30 | Before 9/1 | After 9/1 | QTY | SUB TOTAL |
|---|--------------------------------|--|---|------------------------|-----------|
| WEEKEND PACKAGES 4 Day Pass: Admission to ALL workshops, Evening Open Dancing, T-Shirt (Before April 30 th) SAT NIGHT DINNER NOT INCLUDED <i>The evening show will be free to all purchasing a Saturday or Weekend Pass</i> | 135 ea | 135 ea | \$150 | | \$ |
| (Before April 30th, this section MUST be filled out in order to receive your free shirt) Event T-Shirt We highly recommend that you order before Sept 1 st or your size will not be guaranteed Dancer #1 Standard ___ Ladies ___ Size: S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ Dancer #2 Standard ___ Ladies ___ Size: S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ | | Free w/ Pass and T-Shirt Size denoted. \$20 | At Event Only | | \$ |
| Saturday Night Buffett Dinner: Buffett style dinner featuring Chicken Vesuvio, Oven Roasted Potatoes, Homemade Meat Lasagna and Penne Pasta Primavera. Plus a variety of soups, salads and desserts. (Menu Subject to change) Includes priority seating for the Saturday Night Show | \$55 ea | \$55 ea | \$60ea | | \$ |
| Weekend Spectator Only: For non-dancers - admission to watch friends and family on the dance floor (includes entertainment show but no dinner or buffet.)Name of Spectator: _____ | \$20 ea | \$20 ea | \$20 ea | | \$ |
| DAILY PACKAGES FRIDAY or SATURDAY (Circle One) Workshops & Open Dance Only (Sunday Only Package Available at the Door only for \$70) | \$70 ea | \$70 ea | \$90 ea | | \$ |
| Step Description Booklet: ___ Paper &/or ___ Flash Drive (Check format) Please select whether you would like your step descriptions in a Paper Format or on flash drive grouped by instructor. Each dance flash drive will be in ".pdf" and can be read by your adobe acrobat program (a free program usually standard on all computers or can be downloaded). NO STEP BOOKS WILL BE MAILED! MUST BE PICKED UP AT EVENT | \$30 Paper \$10 Flash Drive | \$30 Paper \$10 Flash Drive | At Event Only (Paper) \$10 Flash Drive | ___ Paper ___ Flash | \$ |
| CHOREOGRAPHY COMPETITION – NOTE: Requires purchase of a weekend pass. Please read rules located at http://markcosenza.com prior to competition! You will be assigned a 30-minute time slot to demo <i>and</i> teach your dance. All step sheets must be submitted before 09/15/19 Only 10 slots will be assigned and only 1 entry allowed per person. | \$25 | \$25 | \$25 | | \$ |
| <i>Grand Total: NO REFUNDS - If there is a chance you may not be able to make it, you may register at the door.</i> | | | | | |

I, the undersigned, for myself, my heirs, executors and administrators, hereby waive and fully release and agree to hold harmless the "WINDY CITY LINE DANCE MANIA" workshop weekend, its organizers, employees, and their agents harmless from any and all lawsuits, claims or demands of any and every kind and character arising from and in connection with this Event, whether as a spectator, staff member, or attendee. I understand the physical risks of social dancing and assume full responsibility for any injury or personal damages resulting from the " WINDY CITY LINE DANCE MANIA " workshop weekend. I hereby authorize the reproduction, sale, copyright, exhibition, broadcast and / or distribution of any event videotape and photographs of me during all the accompanying activities on Oct 10-13, 2019, without limitations. I certify that I am 18 years of older (application to Legal Guardian if under 18 years of age.) I understand and acknowledge that **NO REFUNDS will be issued under any circumstances.**

Dancer #1 Signature: _____ **Date:** _____

Dancer #2 Signature: _____ **Date:** _____

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|---|--|
| Credit Card: <input type="checkbox"/> MC <input type="checkbox"/> Visa <input type="checkbox"/> Discover # _____ Exp _____ CVV _____ (3 or 4 digit security #) Billing ZipCode _____ Name of Cardholder _____ Signature _____ <input type="checkbox"/> - Check Included | Form must be filled out and signed by person named. Mail registration with payment to: Mark Cosenza 3010 Candlelight Lane; Palm Springs, CA 92264 Questions / Information, Email Mark through his website at http://markcosenza.com All Checks must be made payable to Mark Cosenza |
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