

Windy City Line Dance Mania

October 5 – 8, 2017 ~ Registration Form ~ Please use one form per address!

Dancer 1 Name:	Dancer 2 Name:
City:	State/Zip/Province/
Country:	Phone:
Email (Dancer 1)	Email (Dancer 2)

Item & Description	Before Sept 1st	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 Also, if purchased before April 30 th , you will be eligible to vote for Classic Dances you want to have taught. <i>The evening show will be free to all purchasing a Saturday or Weekend Pass</i>	\$130 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 _____	\$20	At Event Only		\$
Saturday Night Dinner: All Entrees are served with Freshly Baked Dinner Rolls, Salad, Dessert, Appropriate Accompaniments, Freshly Brewed Regular, Decaffeinated Coffees, Specialty Teas and Iced Tea. Also included is Priority Seating for the Dinner Show. Please Select from the following: _____ Chicken Mediteranian: marinated breast of chicken with fresh Italian herbs, a hint of lemon, grilled and topped with a fire roasted tomato olive relish. _____ Rotisserie Sliced Pork loin, with cherry port wine demi glace _____ Vegetable Lasagna (Vegatarian) House made Vegetable Lasagna, topped with roasted tomato marinara	\$60 ea	\$65 ea		\$
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		\$
DAILY PACKAGES				
FRIDAY or SATURDAY (Circle One) Workshops & Open Dance Only (Sunday Only Package Available at the Door only for \$70)	\$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	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 and teach your dance. All step sheets must be submitted before 09/15/17 Only 12 slots will be assigned and only 1 entry allowed per person.	\$25	\$25		\$
Grand Total: NO REFUNDS - TRANSFERS PERMITTED ,HOWEVER, ALL TRANSFERS WILL NOT INCLUDE DINNER OPTION UNDER ANY CIRCUMSTANCES				

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 5-8, 2017, 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:** _____

<p>Credit Card: <input type="checkbox"/> MC <input type="checkbox"/> Visa <input type="checkbox"/> Discover</p> <p># _____ Exp _____ CVV _____ (3 or 4 digit security #)</p> <p>Billing ZipCode _____ Name of Cardholder _____</p> <p>Signature _____</p> <p><input type="checkbox"/> - Check Included</p>	<p>Form must be filled out and signed by person named.</p> <p>Mail registration with payment to:</p> <p>Mark Cosenza 4250 N Marine Drive #2327 Chicago, IL 60613 Questions / Information, Email Mark through his website at http://markcosenza.com All Checks must be made payable to Mark Cosenza</p>
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