2024 50 State Scholarship Application Form

ABC May 29th - June1st 2024

This is a fillable form – please type in all information
One form per contestant entry.

REGISTRATION DEADLINE – March 1st, 2024

E-mail Completed Forms to:

<u>americanballetcompetition@gmail.com</u> PO Box 7 Bountiful, UT 84011-0007 USA

COMPETITOR INFORMATION – PLEASE TYPE or WRITE IN

School:		······ =
School E-Mall:	Participant Name:	Age (As of 5/29/24):Birthdate:Gender:
School E-Mall:	School:	Director:
Address:	Teacher/Coach:	School E-Mail:
*Classical Ballet Variation (age 9 one solo only) Choreographer DIVISION II (Ages 12-15) DIVISION III (Ages 16-20) *Classical Ballet Variation – Black Leotard *Classical Ballet Variation – Costume Add'l Classical Ballet Variation – Costume Add'l Contemporary Solo (performed 2 nd) *Contemporary Solo (performed 2 nd) *Contemporary Solo (performed 2 nd) Choreographer Choreographer Choreographer Choreographer Choreographer	Address:City:	:State: Zip:Country:
*Contemporary Solo (Ages 10 & 11 one solo only) Choreographer		DIVISION I (Ages 9-11)
*Classical Ballet Variation – Black Leotard *Classical Ballet Variation – Costume Add'l Classical Variation (if elected, performed 2"") *Contemporary Solo (performed 1") *Choreographer *Choreographer Choreographer Choreographer Choreographer	*Classical Ballet Variation (age 9 one solo only)	(Ages 10 & 11 second solo if elected)
*Classical Ballet Variation – Black Leotard *Classical Ballet Variation – Costume Add'l Classical Variation (if elected, performed 2 nd) *Contemporary Solo (performed 1 st) Add'l Contemporary Solo (if elected, performed 2 nd) *Choreographer Choreographer	*Contemporary Solo (Ages 10 & 11 one solo only)	Choreographer
*Classical Ballet Variation – Costume Add'l Classical Variation (if elected, performed 2"d) *Contemporary Solo (performed 1st) Add'l Contemporary Solo (if elected, performed 2"d) Choreographer Choreographer Choreographer Choreographer Mobile: FEMail: Mobile: City: State: Zip: Country: FEES: Enter division and add any elective solos Division I - \$250 \$ XXX Division II - \$315 \$ XXX Division III - \$315 \$ XXX Division	DIVISION II (Ages 12-15)	DIVISION III (Ages 16-20)
*Contemporary Solo (performed 1st)	*Classical Ballet Variation – Black Leotard	
*Contemporary Solo (performed 1st)	*Classical Ballet Variation – Costume	
Add'l Contemporary Solo (if elected, performed 2nd)	Add'l Classical Variation (if elected, performed 2 nd)	
### PROPRIANT CONTACT INFORMATION Parent's Name:	*Contemporary Solo (performed 1st)	Choreographer
Parent's Name:		Choreographer
FEES: Enter division and add any elective solos Division I	IMPORTANT CONTACT INFORMATION	
FEES: Enter division and add any elective solos Division I - \$250 \$XXX Division II - \$315 \$XXX Division III - \$315 \$XXX Add/I Contemporary Solo - \$90 \$XXX Add/I Contemporary Solo - \$90 \$XXX Contemporary Solo - \$90 \$XXX Add/I Contemporary Solo - \$90 \$XXX Contemporary Solo only - \$315 (not in ballet) \$XXX Contemporary Solo Only - \$315 (not in ballet) \$XXX Jandicate Payment Method:XXXX TOTAL \$XXX (Check, Money Order, Wester Union, Credit Card) CC#XXX ExpXXXCVP XXX Zip CodeXXX Competition Tickets may be purchases at check-in or theater door. Sg/day or \$20/3 day pass - children 12 and younger \$3/day. One complimentary Class Audit Pass for Director or Teacher Representing participating school Teachers & Parents of competitors who wish to observe all master classes - \$65 Outside dance teachers who wish to audit ABC Master Classes and view all competition events may purchase 3-Day Audit Passes at check-in times or e-mail this form to: abcmason@gmail.com Names for Audit Pass: Director: Other:	Parent's Name:	E-Mail:Mobile:
Division I - \$250 \$ XXX Division II - \$315 \$ XXX Division III - \$315 \$	Address:	City:State:Zip:Country:
Division II - \$315 \$ XXX Director or Teacher Division III - \$315 \$ XXX Director or Teacher Representing participating school Additional Ballet Solo - \$90 \$ XXX Director or Teacher Add'I Contemporary Solo - \$90 (if in ballet) \$ XXX Director or Teacher Representing participating school Teachers & Parents of competitors who wish to observe all master classes - \$65 Add'I Contemporary Solo - \$90 \$ XXX Director or Teacher Representing participating school Teachers & Parents of competitors who wish to observe all master classes - \$65 Outside dance teachers who wish to audit ABC Master Classes and view all competition events may purchase 3-Day Audit Passes at check-in times or e-mail this form to: abcmason@gmail.com Names for Audit Pass: Director: Other:	FEES: Enter division and add any elective solos	3-DAY CLASS AUDIT PASS
Additional Ballet Solo - \$90 \$XXX Add'I Contemporary Solo - \$90 (if in ballet) \$XXX Add'I Contemporary Solo - \$90 \$XXX Contemporary Solo Only - \$315 (not in ballet) \$XXX 3-Day All Events/Audit Pass \$65 x #XXX \$XXX Indicate Payment Method:XXXXTOTAL \$XXX (Check, Money Order, Wester Union, Credit Card) CC#XXX Exp_XXX_CVP XXX_Zip CodeXXX Competition Tickets may be purchases at check-in or theater door. \$8/day or \$20/3 day pass - children 12 and younger \$3/day. Representing participating school Teachers & Parents of competitors who wish to observe all master classes - \$65 Outside dance teachers who wish to audit ABC Master Classes and view all competition events may purchase 3-Day Audit Passes at check-in times or e-mail this form to: abcmason@gmail.com Names for Audit Pass: Director: Other:		XX One complimentary Class Audit Pass for
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Add'l Contemporary Solo - \$90 (if in ballet) \$XXX Add'l Contemporary Solo - \$90 \$XXX Contemporary Solo Only - \$315 (not in ballet) \$XXX 3-Day All Events/Audit Pass \$65 x #XXX \$XXX Indicate Payment Method:XXXXTOTAL \$XXX (Check, Money Order, Wester Union, Credit Card) CC#XXX Exp_XXX_CVP XXX_Zip CodeXXX Competition Tickets may be purchases at check-in or theater door. \$8/day or \$20/3 day pass - children 12 and younger \$3/day. who wish to observe all master classes - \$65 Outside dance teachers who wish to audit ABC Master Classes and view all competition events may purchase 3-Day Audit Passes at check-in times or e-mail this form to: abcmason@gmail.com Names for Audit Pass: Director: Other:	Additional Ballet Solo - \$90 \$ X	XX Teachers & Parents of competitors
Add'l Contemporary Solo - \$90 \$ XXX Outside dance teachers who wish to audit 3-Day All Events/Audit Pass \$65 x # XXX \$ XXX Standard Stand		 '
Contemporary Solo Only - \$315 (not in ballet) \$XXX 3-Day All Events/Audit Pass \$65 x #XXX \$XXX \$25 discount if registered by March 1st \$XXX Indicate Payment Method:XXXXTOTAL \$XXX (Check, Money Order, Wester Union, Credit Card) CC#XXX Exp_XXX_CVP XXX_Zip CodeXXX Competition Tickets may be purchases at check-in or theater door. \$8/day or \$20/3 day pass - children 12 and younger \$3/day. Outside dance teachers who wish to audit ABC Master Classes and view all competition events may purchase 3-Day Audit Passes at check-in times or e-mail this form to: abcmason@gmail.com Names for Audit Pass: Director: Other:		
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\$25 discount if registered by March 1 st \$XXX Indicate Payment Method:XXXXTOTAL \$XXX (Check, Money Order, Wester Union, Credit Card) CC#XXX ExpXXXCVP XXX_Zip CodeXXX Competition Tickets may be purchases at check-in or theater door. \$8/day or \$20/3 day pass - children 12 and younger \$3/day. or e-mail this form to: abcmason@gmail.com Names for Audit Pass: Director: Other:	·	may purchase 3-Day Audit Passes at check-in times
(Check, Money Order, Wester Union, Credit Card) CC#XXX	_	or e-mail this form to: abcmason@gmail.com
CC#XXX Exp _XXX_CVP XXX_Zip CodeXXX Names for Audit Pass: Director: Other:		α_
Competition Tickets may be purchases at check-in or theater door. \$8/day or \$20/3 day pass – children 12 and younger \$3/day. Director: Other:		Names for Audit Pass:
\$8/day or \$20/3 day pass – children 12 and younger \$3/day. Other:		

I verify that my dancer resides and trains in the state listed above, and I have included a letter of recommendation from my ballet teacher.