

ROUTINE SUBMISSION FORM

Enclosed with the \$10 performance entry fee. Checks may be written to **Writer's Block Ink**.
Songs must be submitted to writersblock2@gmail.com as an mp3 file by April 18th, 2015.

Organization Name: _____

Director: _____

Email: _____ Phone: (_____) _____

Address: _____

Performance Category (Circle One):

Acrobatic/Gymnastic	Ballet	Contemporary
Hip-Hop	Ethnic	Modern
Musical Theater	Tap	Jazz

Name of Routine: _____

Length of Routine: _____

Description of Routine (props, costumes, start on or off stage):



The Writer's Block Ink. Incorporated

12 Masonic Street New London, CT 06320
(860)44.BLOCK | (860)442.5625

www.writersblockink.org | writersblock2@gmail.com

DANCER ROSTER/RELEASE FORM

Print the names and age of all dancers performing on this list.

	Dancer's Name	Age	Parent/Guardian Signature
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			

(FOR ADDITIONAL NAMES AND INFORMATION ATTACH ANOTHER DANCER ROSTER/RELEASE FORM)

Signature of Authorized Legal Representative of Studio _____

*Any dancer participating in any dance production takes certain inherent risks. These include, but are not limited to, sprains, bruises, pulled muscles, and broken bones. Participation in this production indicates the acceptance of such risks. Therefore, the above signed guardians hereby release and will not hold **The Writer's Block Ink, Inc.** and its Directors, Officers, or Staff liable or responsible for injuries or damages sustained while participating in any activity related to **The Writer's Block Ink, Inc.** We also give **The Writer's Block Ink, Inc.** permission to use any photos and/or videos for advertising or news coverage through print or electronic media without any form of compensation.*



The Writer's Block Ink, Incorporated

12 Masonic Street New London, CT 06320

(860)44.BLOCK | (860)442.5625

www.writersblockink.org | writersblock2@gmail.com