

2021 Dance Entry Form

Veteran Name:	Last 4:	
Veteran Phone Number:	Age:	
Veteran Mailing Address (including Zip Code):	Email:	
Would you like us to add you to the mailing list to receive info for future years? Circle one:		
Yes: My contact info has NOT changed since last year.	Yes: My contact info from last year has changed. Please update	No: I do not want to receive updates.
Title of Piece:	Title of Music Selection <i>(if different from Title of Entry):</i>	
Non-Veteran dance partner name(s) (if applicable):	Was the entry choreographed by the Veteran? YES or NO	

Veterans: By submitting entries into the competition, you are confirming the following statement is true: I/we have read all the rules for the division in which I/we am/are entering. If my/our entry places first at the national level, I/we understand that I/we will be invited to attend the National Veterans Creative Arts Festival. It is required that I/we attend and participate in rehearsals for the entire Festival week concluding with the stage show performance.

ART SHOW STAFF ONLY:

Category Number/ Name for Entry #1:	
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CONSENT? _____