# FORM OF SHARE

To be completed for each choreography and to be mailed to : info@danzachepassione.com

By subscribing this form you intend to participate in the competition
Danza ... che passione! 2027 with the following data:

School Name/Participant Name(private) ……..……..……..……
Address ……..... City …… State (.……..… )
Phone/Mobile …….. ……. E-Mail ……..…… WEB ……..……..
School responsible : First Name ……..……..…… Last Name ……..…..……..……..…..
Artistic Director : First Name ……..……..… Last Name ….....……..

**CHOREOGRAPHY :**

**SECTION** : Classical ◯ Character ◯ Neoclassical ◯ Pas de deux/Duo ◯
Contemporary ◯ Modern Jazz ◯ Choreographic Composition ◯

Category : Baby ◯ Elementary ◯ Students ◯ Juniores ◯ Seniores ◯

Title of the piece :

Choreografer / Coreography :

Author of the piece :

Duration of the piece:

## COMPLETE IN THE PRINTER BARRING THE RELEVANT BOX

| First Name | Last Name | Date of birth | Soloist | Group | Pas de deux DUO | First Name | Last Name | Date of birth | Soloist | Group | Pas de deux DUO |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

## DECLARATION OF RESPONSIBILITY

By subscribing to this form, the school/group manager, or (for the majority) the undersigned, hereby declares:

- I am aware of the regulation governing and regulating the dance competition "Danza che Passione" and I accept it;
- I raise the organization of the aforementioned competition from any liability for damages to things or persons that should occur before, during and after the event;
- I am in possession of the full physical fitness certificate of the engaged dancers and also accept that in no case the organization of the Competition may be held responsible for the physical conditions of the candidates, nor for injuries, accidents or illnesses that occur during the normal course of the event;
- I have received the authorization from the parents and/or who exercises the paternity of the juvenile participants;
- I declare also that all participants are covered by a regular insurance for events outside the home school.

**Italian Privacy Law**

Considering the EU law GPDR/2016 I authorize the treatment of the personal data for the goals of the competition "Danza…che passione! 2027".

Signature of the Legal Representative

……

Signature

Date …….

……

compile and mail to : info@danzachepassione.com