

**Ultimate Dance Competition Cannock May 2026**

Name:

Organisation Name: (if applicable)

Address: Postcode:

Contact number:

Email:

Please enter details of all LYRICAL SOLO entries and extend table as necessary:

|  |  |  |
| --- | --- | --- |
| Dancer Name | Ability Category (Novice, intermediate, Advanced, SN) | Age Group |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Please enter details of all STREET SOLO entries and extend table as necessary:

|  |  |  |
| --- | --- | --- |
| Dancers’ Names | Ability Category (Novice, intermediate, Advanced, SN) | Age Group |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Please enter details of all LYRICAL DUO entries and extend table as necessary:

|  |  |  |
| --- | --- | --- |
| Dancer Name | Ability Category (Novice, intermediate, Advanced, SN) | Age Group |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

In the table below, please state all Classical team entries and extend table as necessary:

|  |  |  |  |
| --- | --- | --- | --- |
| Team Name | Ability Category (Novice, Intermediate, Advanced, SN) | Age Group | Dance Style |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

In the table below, please state all Theatrical team entries and extend table as necessary:

|  |  |  |  |
| --- | --- | --- | --- |
| Team Name | Ability Category (Novice, Intermediate, Advanced, SN) | Age Group | Dance Style |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

In the table below, please state all Street team entries and extend table as necessary:

|  |  |  |
| --- | --- | --- |
| Team Name | Ability Category (Novice, Intermediate, Advanced, SN) | Age Group |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Please provide a list of all dancers competing in the event, their ages on the day of the event and the names of the teams that they are performing in (extend table where necessary):

|  |  |  |
| --- | --- | --- |
| DANCER NAME | DANCER AGE | TEAM(S) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Please state number of dancers in Parent crew so we can guarantee them a spectator seat: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Parents team dancers must purchase a dancer ticket

I have read and understood the terms and conditions for attending this event. I have written consent for all applicants entering the competition, allowing photographs and other media to be used as advertising purposes on social media and all other media in relation to the organisers of this event.

Signed: ……………………………………………………………………………….Date:

|  |  |  |
| --- | --- | --- |
| Ticket/Entry Type | Amount Required | Total Cost |
| Dancer Ticket @ £19 |  | £ |
| Spectator Ticket @ £16 |  | £ |
| Additional entries @ £5 |  | £ |
| U3 Tickets @ £0 |  | £0 |
| Carer Tickets @ £12 |  | £ |
|  | Grand Total = | £ |