

**Concert Registration Form**  
**daCi USA Gathering “Creating Landscapes”**  
**August 12–15, 2008**  
**Brigham Young University**

Name of Group/Individual	
Address, City, State, ZIP	
Contact Name, E-mail and phone #	
Choose one or more	<input type="checkbox"/> Individual <input type="checkbox"/> Studio <input type="checkbox"/> K–12 education <input type="checkbox"/> University <input type="checkbox"/> Professional
Age of Performers	<input type="checkbox"/> 8–10 <input type="checkbox"/> 11–13 <input type="checkbox"/> 14–18 <input type="checkbox"/> Adult
Which performance time would you prefer?	<input type="checkbox"/> Wednesday evening, August 13 <input type="checkbox"/> Thursday evening, August 14
Title of Dance	
Choreographer(s)	
Music Artist	
No. of Performers (      )	List Performers' Names Correct spelling for program; in alphabetical order:
Description of Costumes (include predominant colors)	
General Theme or Mood of Dance	
Cue Order	<input type="checkbox"/> Music and lights <input type="checkbox"/> Music then lights <input type="checkbox"/> Lights then music
Dancers Begin	<input type="checkbox"/> On the stage <input type="checkbox"/> # how many <input type="checkbox"/> Off the stage on stage right <input type="checkbox"/> Off the stage on stage left
General Wash for Overheads and Sides	<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> Intense    (      ) % <input type="checkbox"/> Warm wash <input type="checkbox"/> Cool wash <input type="checkbox"/> Both
Timing of Wash	(      ) Seconds to full
End of Dance	<input type="checkbox"/> Bump to black <input type="checkbox"/> Quick fade to black <input type="checkbox"/> Slow fade to black