

**CR OPEN DANCE FEST  
SPANISH DANCE**

Please send registration form to [inscripcion@cropendancefest.com](mailto:inscripcion@cropendancefest.com) music: [musica@cropendancefest.com](mailto:musica@cropendancefest.com)

Deadline: September 10th, 2024.

Studio Name:	
Studio Owner:	
Teacher Name:	
Email:	
Phone:	
Country:	

**Mark with X in the box on the left**

<input type="checkbox"/>	Junior 6-14
<input type="checkbox"/>	Youth 15-18
<input type="checkbox"/>	Adult A 19-39
<input type="checkbox"/>	Adult B 40+

**Mark with X in the box on the left**

<input type="checkbox"/>	SOLOIST PROFESIONAL
<input type="checkbox"/>	SOLOIST AMATEUR PRINCIPIANT
<input type="checkbox"/>	SOLOIST AMATEUR ADVANCED
<input type="checkbox"/>	DUO/TRIO OPEN
<input type="checkbox"/>	TEAM OPEN (4+ participants)

**DANCERS DATA**

Nº	Full Name	Date of birth			Age
1					
2					
3					
4					
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I hereby declare that I have read and understood Rules and Regulations of FECOBADE

Date: \_\_\_\_\_

Sing: \_\_\_\_\_