



# S & K Limestone Coast Solo Championships

May 25<sup>th</sup>, 26<sup>th</sup> & 27<sup>th</sup> 2017

**Venue** – Sir Robert Helpmann Theatre, 10 Watson Street, Mount Gambier.

**Prizes** – Sashes 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> – Ribbons and certificates for HM and HC.

**Items** – Best Type Solo \$22 / Graceful Solo \$22 .

(from Sub Juniors to Masters)

## ACF RULINGS

Full catering provided throughout Friday and Saturday's Competition.

DVDs and Professional Photographs will be available for purchase.

Sorry no lighting available (except for Senior Graceful Open Sections).

## OPEN SECTION =

Any competitor who has been in the SA or VIC National team in 2015/2016/2017.

Any competitor in the "Open or Open Reserve" gradings in Victorian metropolitan competitions.

Any competitor who's been in the CHAMPIONSHIP Division (for Graceful or Best Type) in 2016 or 2017 at CASA.

## NOVICE SECTION =

Any competitor who doesn't meet any requirements for the Open section.

***Sections will be divided accordingly at the discretion of the competition committee in relation to nomination numbers.***

## 16 YEARS AND ABOVE

***All entries for 16 years and above must send in with entry copy of grade 4 exam results. 80% pass mark in aesthetics/dance must be obtained to be eligible. (Country grade 3 results)***

Please sign in and hand in music at the registration desk before the commencement of your child's section.

# ENTRIES CLOSE MONDAY MAY 1ST

(sorry no late entries will be accepted)

ANY ENQUIRIES PLEASE PHONE KYM LINDNER: 0417824922 TERESA GRECO: 0421788355

Email enquiries – [zonaylake@bigpond.com](mailto:zonaylake@bigpond.com)

# Best Type Solo Nomination

NAME.....

DATE OF BIRTH.....AGE (as at 31/12/2017).....

ADDRESS.....

CLUB.....

CIRCLE ONE:    OPEN        NOVICE                    SKILL LEVEL.....

CONTACT NUMBERS

DAYTIME.....MOBILE.....

EMAIL (schedule and program will be sent via email) .....

COACH .....CURRENT ACF #.....

I CERTIFY THAT I .....AND/OR THE CLUB  
OF WHICH I AM A COACH, HAS A COPY OF THE ACF BANNED MOVEMENTS  
VIDEO AND I FURTHER CONFIRM I HAVE VIEWED THIS VIDEO IN FULL.

SIGNED .....DATE.....

PAYMENTS CAN BE PAID VIA DIRECT DEBIT / CHEQUE /MONEY ORDER ONLY

**PAY VIA DIRECT DEBIT**

BSB- 015660

ACCOUNT NUMBER - 225641001

ACCOUNT NAME – Kym Lindner T/AS Synergy Dance

MESSAGE/REFERENCE - Please write competitors name

**YOU MUST ATTACH THE RECEIPT NUMBER, AMOUNT AND DATE OF PAYMENT BELOW OR WE WILL NOT ACCEPT YOUR ENTRY.**

**Receipt Number.....Amount \$..... Date of Payment.....**

.....

**CHEQUES AND MONEY ORDERS CAN BE MADE OUT TO**

Kym Lindner T/AS Synergy Dance

.....

Once your payments have been finalised please post your entry form with your cheque OR receipts etc to:

**S & K Limestone Coast Solo Championships**

**PO BOX 3154 Mount Gambier 5290**

# Graceful Solo Nomination

NAME.....

DATE OF BIRTH.....AGE (as at 31/12/2017).....

ADDRESS.....

CLUB... ..

CIRCLE ONE:    OPEN            NOVICE            SKILL LEVEL.....

CONTACT NUMBERS

DAYTIME.....MOBILE.....

EMAIL (schedule and program will be sent via email) .....

COACH .....CURRENT ACF #.....

I CERTIFY THAT I ..... AND/OR THE CLUB  
OF WHICH I AM A COACH, HAS A COPY OF THE ACF BANNED MOVEMENTS  
VIDEO AND I FURTHER CONFIRM I HAVE VIEWED THIS VIDEO IN FULL.

SIGNED .....DATE.....

PAYMENTS CAN BE PAID VIA DIRECT DEBIT / CHEQUE /MONEY ORDER ONLY

**PAY VIA DIRECT DEBIT**

BSB- 015660

ACCOUNT NUMBER - 225641001

ACCOUNT NAME – Kym Lindner T/AS Synergy Dance

MESSAGE/REFERENCE - Please write competitors name

**YOU MUST ATTACH THE RECEIPT NUMBER, AMOUNT AND DATE OF PAYMENT BELOW OR WE WILL NOT ACCEPT YOUR ENTRY.**

Receipt Number.....Amount \$..... Date of Payment.....

.....

**CHEQUES AND MONEY ORDERS CAN BE MADE OUT TO**

Kym Lindner T/AS Synergy Dance

.....

Once your payments have been finalised please post your entry form with your cheque OR receipts etc to:

**S & K Limestone Coast Solo Championships**

**PO BOX 3154 Mount Gambier 5290**



# S & K Limestone Coast

## Scholarships

**May 25<sup>th</sup>, 26<sup>th</sup> & 27<sup>th</sup> 2017.**

**Venue** – Sir Robert Helpmann Theatre, 10 Watson Street, Mount Gambier.

**Prizes** – Winner receives sash and money

**Championship Scholarship \$35 ENTRY FEE**

**Sub Junior & Junior \$150**

**Intermediate \$150**

**Senior \$200**

*DVDs and Professional Photographs will be available for purchase.*

Lighting will be available for Scholarships Section

### **Rules and Conditions**

- **Competitor must have entered at least one other section of the competition. It can be from either Graceful or Calisthenics Solo**
- **All entries will attend a class workshop with an adjudicator first. This will be a closed class. Each section will have individual classes, starting with Subbies and working through to Seniors. Subbies and Juniors - 1 hour, Inters and Seniors - 1.5 hours.**
- **Only 10 entries will be selected by the adjudicator from each age section who will move on to perform solo at the theatre in the evening. Adjudicator's decision will be final and no protests will be accepted.**
- **Black leotard and hair in bun must be worn to workshop, however no stage make-up permitted. Clubs and rods will be required.**
- **There must be at least 10 entries for each age section of scholarship to be held. If there is a lack of entries a refund will be given.**
- **Students who are selected to perform at the theatre will be given a lighting sheet after scholarship class. This will need to be filled in immediately after so lights can be given to lighting technician.**
- **Each age section winner will be presented on stage with the winning sash and prize money by the adjudicator.**
- **Sub Junior Prize \$150**
- **Junior Prize \$150**
- **Intermediate \$150**
- **Senior \$150**

# Scholarship Nomination

NAME.....

DATE OF BIRTH: .....AGE (as at 31/12/2017).....

ADDRESS.....

CLUB.....

CIRCLE ONE: OPEN NOVICE SKILL LEVEL.....

CONTACT NUMBERS

DAYTIME.....MOBILE.....

EMAIL (schedule and program will be sent via email) .....

COACH .....CURRENT ACF #.....

I CERTIFY THAT I .....AND/OR THE CLUB  
OF WHICH I AM A COACH, HAS A COPY OF THE ACF BANNED MOVEMENTS  
VIDEO AND I FURTHER CONFIRM I HAVE VIEWED THIS VIDEO IN FULL.

SIGNED .....DATE.....

PAYMENTS CAN BE PAID VIA DIRECT DEBIT / CHEQUE /MONEY ORDER ONLY

## PAY VIA DIRECT DEBIT

BSB- 015660

ACCOUNT NUMBER - 225641001

ACCOUNT NAME – Kym Lindner T/AS Synergy Dance

MESSAGE/REFERENCE - Please write competitors name

**YOU MUST ATTACH THE RECEIPT NUMBER, AMOUNT AND DATE OF PAYMENT BELOW OR WE WILL NOT ACCEPT YOUR ENTRY.**

Receipt Number.....Amount \$..... Date of Payment.....

.....

## CHEQUES AND MONEY ORDERS CAN BE MADE OUT TO

Kym Lindner T/AS Synergy Dance

Once your payments have been finalised please post your entry form with your cheque OR receipts etc to:

**S & K Limestone Coast Solo Championships**

**PO BOX 3154 Mount Gambier 5290**