

TEAM PARTICIPATION LIST

FLORIDA TEAMS ONLY



Please print this form and type or clearly handwrite first and last name of each performer and all coach(s) participating and purchasing the "Contest Only" Florida Package. Only the performers and coaches on this list will receive tickets and coaches wristbands to get into the Sports Complex and the back stage areas.

Mail this form at least ten days prior to the participation list due date in your Agreement. Your final invoice cannot be calculated without this form. Duplicate as needed.

Indicate performers with a "P" and coaches with a "C."

TEAM NAME: _____

TOTAL # OF COACHES WITH WRISTBANDS: _____ **PERFORMERS:** _____

NAMES:

- | | |
|-----------|-----------|
| 1. _____ | 19. _____ |
| 2. _____ | 20. _____ |
| 3. _____ | 21. _____ |
| 4. _____ | 22. _____ |
| 5. _____ | 23. _____ |
| 6. _____ | 24. _____ |
| 7. _____ | 25. _____ |
| 8. _____ | 26. _____ |
| 9. _____ | 27. _____ |
| 10. _____ | 28. _____ |
| 11. _____ | 29. _____ |
| 12. _____ | 30. _____ |
| 13. _____ | 31. _____ |
| 14. _____ | 32. _____ |
| 15. _____ | 33. _____ |
| 16. _____ | 34. _____ |
| 17. _____ | 35. _____ |
| 18. _____ | 36. _____ |