**
8th Annual Maryland Dance Alliance**

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**EVENT DATE: Friday, February 28, 2020 @ The Gordon Center for Performing Arts**

**SNOW DATE: Monday, March 3, 2020**

**INTENT DUE: OCTOBER 1, 2019 to** **mddancealliance@gmail.com**

**Dance Instructor's Information**

Name:

Position:

School/Studio/Program Name:

School/Studio/Program Address:

City:

School Phone :

Home Phone:

Email Address (school or studio):

**Other Information**

NHSDA Chapter #:

County or School District:

Private School \_\_\_\_\_ Public School \_\_\_\_\_\_ Private Studio \_\_\_\_\_ Community/Other \_\_\_\_\_

Number of dancers performing (minimum 5, maximum 20):

Will you require a parking space for bus service? Yes \_\_\_No\_\_\_

Dance Instructor's Signature: Principal/Director’s Signature

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(Required Signature) (Required Signature)