



# 66TH AUSTRALIAN NATIONAL SQUARE DANCE CONVENTION

## April 30th - May 03 2026

Registration Form - Page 1 of 2 - Please complete using **BLOCK LETTERS** and **TICKING APPROPRIATE BOXES**.

Please be advised that Photography and Filming will be occurring at this event. This is for Social Media, Television, Promotion and Historical Records, including Web Sites etc. We trust that you Enjoy, Understand and Respect this. Permission to be filmed and or photographed is a condition of registration for the event.

### PRIMARY REGISTRATION DETAILS

FAMILY NAME: \_\_\_\_\_ PREFERRED NAME \_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_

TOWN / CITY \_\_\_\_\_ STATE \_\_\_\_\_ POST CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PREFERRED PHONE CONTACT NO. \_\_\_\_\_ No. of Dancers on this form attending their first National Convention

PRIMARY EMAIL CONTACT \_\_\_\_\_

M P A1 A2 Contra Rds Clog M F

Tick sessions you are likely to attend

Indication of gender is optional and is used only for statistical analysis.

### ADDITIONAL ADULT REGISTRATION DETAILS - DANCER / NON-DANCER

Family Name	Preferred Name	Non Dancer	Email Contact	Tick sessions you are likely to attend																																													
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M (Male) F (Female)

### YOUNGER ATTENDEES REGISTRATION DETAILS - CRECHE / JUNIOR DANCERS

Family Name	Preferred Name	Age as at 30 / 04 /2026	M F	CRECHE	DANCER
			<input type="checkbox"/> <input type="checkbox"/>	YES NO <input type="checkbox"/> <input type="checkbox"/>	YES NO <input type="checkbox"/> <input type="checkbox"/>
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			

1. Creche up to 12 years AND Junior Dancers - up to 17 years of age at time of Convention. Creche may only be available at EVENING SESSIONS and subject to demand and staff availability.

2. Please tick boxes for creche, dancer or both (refer Convention information brochure)

3. Other Notes applicable to creche e.g. additional activities and health forms, will be distributed to the Primary Registration.

**Creche Registration closing date 30/11/2025**

### ADMINISTRATION USE ONLY

Receipt No/s \_\_\_\_\_ Date \_\_\_\_\_ Amount \$ \_\_\_\_\_ Registration No/s \_\_\_\_\_ Area \_\_\_\_\_  
 Caller/Cuer  Younger Attendee  Creche  Dressed Set  Advertise  Booth  First Convention

**Registration Form - Page 2 of 2 - Please complete using BLOCK LETTERS and TICKING APPROPRIATE BOXES.**

**CALLER / CUER REGISTRATION - closing date 30/11/2025**

Registration is a prerequisite to applying to Call / Cue but that does not confirm any entitlement

Name of Caller / Cuer \_\_\_\_\_

**I would like to register for the following :-** Please tick appropriate boxes

Mainstream	<input type="checkbox"/>	I am available for :-	<i>All Dance Sessions</i>	<input type="checkbox"/>
Plus	<input type="checkbox"/>	<b>OR</b>		
A1	<input type="checkbox"/>			
A2	<input type="checkbox"/>	<i>Monday Night</i>	<input type="checkbox"/>	<i>Thursday Afternoon</i>
Rounds	<input type="checkbox"/>	<i>Tuesday Afternoon</i>	<input type="checkbox"/>	<i>Thursday Night</i>
Clogging	<input type="checkbox"/>	<i>Tuesday Night</i>	<input type="checkbox"/>	<i>Friday Afternoon</i>
Contra	<input type="checkbox"/>	<i>Wednesday Afternoon</i>	<input type="checkbox"/>	<i>Friday Night</i>
MC Duties	<input type="checkbox"/>	<i>Wednesday Night</i>	<input type="checkbox"/>	<input type="checkbox"/>

I acknowledge that 1. I may be programmed at any time on my nominated days and that my allocation of calls/cues may be reduced if not available for all sessions. **AND**

2. I possess an approved Music Licence (e.g. One Music, BMI, ASCAP)

**Available MEDIA:** Please indicate preference 3.5mm (1/8) line in  USB

I would like to be considered for a duet with \_\_\_\_\_

**Expressions of Interest for the Dressed Set Parade**

**Expression of interest as a Volunteer during this event. We will contact you if required**

Name of Club \_\_\_\_\_

Club Caller \_\_\_\_\_

The Club Caller will be contacted to collect details in preparation for the Dressed Set Parade

Marshal  Assist with Round Ups and filling squares

Hosting  Assist preparing refreshments, tea/coffee stations

Others  including assembling and distribution of Registration Packets, decorating, running errands.

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

**Expressions of Interest for Booth Space.**

**I am a qualified First Aid Officer and will be available to render help if required.**

Tick Box if Required

Full details in Information Shell

Name \_\_\_\_\_

**TICKETING**

<b>Adult</b>	<b>No.</b>	<b>@</b>	<b>COST</b>
30th Apr - 11th Jul '25	_____	@	\$ 95.00 _____
12th Jul - 30th Nov '25	_____	@	\$ 120.00 _____
1st Dec - 3rd May '26	_____	@	\$ 150.00 _____
<b>Younger Attendees</b>	_____	@	\$ 55.00 _____
<b>Advertising</b>			
Half Page	_____	@	\$40.00 _____
Full Page	_____	@	\$75.00 _____
<b>Booth Space</b>	_____	@	\$ 0.00 _____
Additional Tables	_____	@	\$ 25.00 _____

**TOTAL PAYMENT = AUD \$**

Tick Appropriate Box **PAYMENT METHOD**

EFT RECEIPT No. \_\_\_\_\_ Date \_\_\_\_\_

Transfer funds to 65th ANSDC Suncorp Bank  
 BSB 484 799 Account No. 696 990 061  
 Reference Your Primary Registration Family Name & State.  
 Attach copy of the EFT receipt to this completed registration form

**CREDIT/DEBIT CARDS (VISA & MASTERCARD)**

All card payments will be processed by the "Square" Payment system.

Reference for either option **Primary Registration Family Name & State.**

Option 1: If you are completing this form online and select this option it will take you to the "Square" secure payment site.

Option 2: If you wish the Registrar to contact you to process the card

- |                    |   |
|--------------------|---|
| <b>Please note</b> | 1. Per Delegate cancellation Fee \$ 15.00 AUD |
|                    | 2. Cheque Dishonour Fee \$ 15.00 AUD          |

Please complete both pages of this form. Once completed please ensure the form is returned with a cheque, or a copy of the EFT receipt or credit card payment method to:- The Registrar, Kaye Chandler, 66th ANSDC, via post:- 134 Pitcairn Street, MONTROSE, Tasmania, 7010, or scan and email to:-

secretary/registrar@2026.ansdc.au