Company Name:	
Choreographer(s):	
Address:	
Phone:Ema	il:
Γitle of Choreography:	
	s-5 Dancers) Ensemble (6 or More Dancers) # of Dancers orary Ethnic Hip Hop Jazz Modern Tap
Other (please specify):	Run Time: (Limit 10 minutes)
Technical Requirements:	
<del>-</del>	Music
	Title:
Copyright rules and music licenses are the responsib	oility of the choreographer

Deadline Options (Postmarked by):

Date: October 30, 2025 Cost: \$75piece

Cost: \$100piece Date: November 30, 2025

Cost: \$30/piece **Student Discount** (Send copy of student ID with submission)

Send completed application materials to:

Rocky Mountain Choreography Festival C/O Imagine Ballet Theatre ibtmason@comcast.net Link to video acceptable

Visit www.imagineballet.org for more information

I hereby release Imagine Ballet Theatre, the Peery's Egyptian Theater, and all municipal and governmental agencies whose property and/or personnel are used, and other sponsoring or cosponsoring company(ies), agency(ies), or individual(s) responsibility for any injuries or damages I or my group may suffer as a result of my participation in the Eleventh Annual Rocky Mountain Choreography Festival. I will additionally permit the use of my name and pictures in broadcasts, telecasts, brochures, web, etc. Imagine Ballet Theatre may use the name and likeness of any participant in any media for promotional purposes. I also understand that the entry fee is non-refundable. I certify that the submitted choreography is original and created by the choreographer whose name I have presented, and that all information in this form is true and complete. I have read the entry information provided for the event and certify my compliance by signature below.

Signature Date