

SonLight Dance Concert Registration Form

Group name _____
Group director _____
Number in group _____ Age of group Children Youth Adult
How long has your group been in ministry? _____
Sponsoring Church/Organization _____

Address _____
City/Zip _____
*Phone _____
*Email _____

*In order to contact you later, your phone number or email address is required. Your application will not be accepted without this information.

DANCE SELECTION

Name of Dance _____
Composer/CD Title _____
Name of Choreographer _____
Length (in minutes) _____

Please send a brief group biography with your application.

Register by August 1, 2011 by mailing or emailing your registration to:
Cyndi Pedersen, 122 Orange Park, Redlands, CA 92374
Phone: 909-557-7186; Email: cyndipedersen@yahoo.com

- Yes I have enclosed our \$25 registration fee per group.
Make checks payable to Trinity Church.
- Yes we would like a 15 minute rehearsal time.
- Yes we will be staying for dinner: _____ people.
- Yes I have enclosed our group's biography.
- New Groups: Yes, I have enclosed my groups biography, video/DVD and reference letter.
- Past Participants: Our group's biography is on file with SonLight Dance.



1551 Reservoir Road, Redlands CA 92374
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