



JOIN THE RIDE

# 67th AUSTRALIAN NATIONAL SQUARE DANCE CONVENTION

April 15th - 19th 2027

Ballarat Minerdome - 994 Grevillea Rd Wendouree Vic 3355

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.



JOIN THE RIDE

## 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                       | High Eng                 | Rds                      | Clog                     | M                        | F                        |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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               | 1st National             | Email Contact | Tick sessions you are likely to attend |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------|----------------|--------------------------|--------------------------|---------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|             |                |                          |                          |               | M                                      | P                        | A1                       | A2                       | High Eng                 | Rds                      | Clog                     | M                        | F                        |
| _____       | _____          | <input type="checkbox"/> | <input type="checkbox"/> | _____         | <input type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____       | _____          | <input type="checkbox"/> | <input type="checkbox"/> | _____         | <input type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____       | _____          | <input type="checkbox"/> | <input type="checkbox"/> | _____         | <input type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____       | _____          | <input type="checkbox"/> | <input type="checkbox"/> | _____         | <input type="checkbox"/>               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

M (Male) F (Female)

## YOUNGER ATTENDEES REGISTRATION DETAILS - CRECHE / JUNIOR DANCERS

| Family Name | Preferred Name | Age as at 15/4/2027 | M                        |                          | F                        |                          | Creche                   |                          | Child Dancer             |                          | Junior Dancer            |                          |
|-------------|----------------|---------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|             |                |                     | M                        | F                        | Yes                      | No                       | Yes                      | No                       | Yes                      | No                       |                          |                          |
|             |                |                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| _____       | _____          | _____               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____       | _____          | _____               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____       | _____          | _____               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____       | _____          | _____               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

1. Creche will be available during evening sessions for children up to the age of 12 as at 15/4/27.
2. Creche will not be available for morning or afternoon sessions.
3. Those registering for Creche will be contacted by our committee to discuss further details
4. Child dancers are those up to 12 years as at 15/4/27
5. Junior Dancers are those between 13 and 18 years of age as at 15/4/27.

Creche Registration closing date 30/11/2026

## ADMINISTRATION USE ONLY

Receipt No/s \_\_\_\_\_ Date \_\_\_\_\_ Amount \$ \_\_\_\_\_ Registration No/s \_\_\_\_\_ Area \_\_\_\_\_

Caller/Cuer  Child Dancer  Junior Dancer  Creche  Dressed Set  Advertisement  Booth  First National

**CALLER / CUER REGISTRATION - closing date 30/11/2026**

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"/> |                           |                           |                          |
| A1          | <input type="checkbox"/> | <b>OR</b>                 |                           |                          |
| A2          | <input type="checkbox"/> | <i>Thursday Evening</i>   | <input type="checkbox"/>  | <i>Sunday Afternoon</i>  |
| High Energy | <input type="checkbox"/> | <i>Friday Evening</i>     | <input type="checkbox"/>  | <i>Sunday Evening</i>    |
| Rounds      | <input type="checkbox"/> | <i>Saturday Afternoon</i> | <input type="checkbox"/>  | <i>Monday Afternoon</i>  |
| Clogging    | <input type="checkbox"/> | <i>Saturday Evening</i>   | <input type="checkbox"/>  | <i>Monday Evening</i>    |
| MC Duties   | <input type="checkbox"/> |                           |                           |                          |

I acknowledge that 1. I may be programmed within the ACF guidelines 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:** 3.5mm (1/8) cable available on stage

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

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

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

Club Caller / Contact \_\_\_\_\_

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

**Expressions of Interest for Booth Space.**

Tick Box if Required

Full details in Information Shell

**Expression of interest as a Volunteer during this event.**

**We will contact you if required.**

|          |                          |   |
|----------|--------------------------|---|
| Marshall | <input type="checkbox"/> | Assist with Round Ups and filling squares   |
| Hosting  | <input type="checkbox"/> | Assist preparing refreshments, tea/coffee stations  |
| Others   | <input type="checkbox"/> | Including assembling and distribution of registration packets, decorating, running errands. |

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

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

Name \_\_\_\_\_

**TICKETING**

| Adult                       | No.     | COST        |
|-----------------------------|---------|-------------|
| 15th April to 30th June '26 | _____ @ | \$120 _____ |
| 1st July to 31st Dec '26    | _____ @ | \$150 _____ |
| From 1st Jan '27            | _____ @ | \$180 _____ |
| <b>Younger Attendees</b>    |         |             |
| Creche Only                 | _____ @ | \$75 _____  |
| Creche & Child Dancer       | _____ @ | \$75 _____  |
| Child Dancer up to 12 yrs   |         | Free _____  |
| Junior Dancer 13 to 18 yrs  | _____ @ | \$75 _____  |
| Non-Dancer                  |         | Free _____  |
| <b>Advertising</b>          |         |             |
| Half Page                   | _____ @ | \$40 _____  |
| Full Page                   | _____ @ | \$75 _____  |
| <b>Booth Space</b>          | _____ @ | \$50 _____  |
| Additional Tables           | _____ @ | \$25 _____  |

**TOTAL PAYMENT = AUD \$**

**PAYMENT METHOD**

Tick Appropriate Box

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

Transfer funds to the **67th ANSDC Suncorp Bank**  
**BSB 484 799 Account No. 350 125 300**  
**Swift Code METWU4B (International Transactions only)**  
**Reference** Your Primary Registration Family Name & State  
 Attached 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, **SAVE** the form first, then Click on Secure payment

**Secure Payment**

Option 2: If you wish the Registrar to contact you to process the card payment select this option

**NB: Cancellation may attract a \$10 Admin fee per delegate.**

Please complete both sides of this form and **SAVE** them. Once completed please ensure the form is returned with a copy of the EFT receipt or credit card payment method to:-  
 The Registrar, PO Box 7134 Cranbourne Vic 3977. Or scan and email the form with the Receipt details to:- **Registrar2027@gmail.com**