

## Name Name for Name Tag Address \_\_\_\_\_ Zip \_\_\_\_ City/State Telephone(Primary) E-mail Emergency Contact: Name Phone [] Female [] Male I am: I am registering as: [] Adult Dancer [] Adult Musician [ ] Teen (13-18) [ ] Child 2 years & **Housing**: Please assign me to a [ ] Bunk House (8 people I prefer to room with: [] With other couples I prefer to room: My food preference is: [] Non-vegetarian [] Vegetari Note: Since food must be ordered [ ] I would like to rent Linens [ ] I am traveling and will need help with local transpor If you are registering as a dancer: How would you describe your Scottish Country dancing ability? [ ] I usually need help getting through dances. [] I'm still learning to pas de basque. [ ] I'm comfortable with figures like reels and allemande. [] I can bourrel, set and link for 3, & tournee. [] Other What type of class appeals to you? [ ] Improves my footwork & more comfortable with basic figures [ ] Easy on my feet, but with interesting dances [ ] Helps me with advanced figures [ ] Challenging for high level ability, physical and mental [] Other [] Singing Class []Yes []No All who participate in the dance classes and/or evening dances must have a minimum of six months of Scottish Country Dance instruction. I have six months or more of Scottish dancing experience. [] Yes [] No

[] Music Class

I will be playing the following instrument(s):

My playing level is [] basic [] intermediate [] advanced

I have experience playing the following kinds of dance:

## 2023 Registration September 22-24, 2023

Please print clearly and complete one form per applicant.
Questions? Contact:
Cecily Selling, Chair – 215-248-5998
Bill Wallace, Registrar – 301-706-6004
E-mail: Registrar@ScottishWeekend.org
http://www.ScottishWeekend.org

<u>conclusions</u>			
[ ] I plan to apply for financial aid.  Please visit <a href="www.scottishweekend.org">www.scottishweekend.org</a> to read the financial aid policy and download the application and teacher recommendation forms. Please apply by the deadline of July 15.			
[] Adult Spectator			
od preference at camp.			
th small duties. Are ike to volunteer for or y late.			
use Cabin \$410 \$310 \$275 \$225 \$			
\$			
\$for all) ber 1. nated individuals tion records (CDC or by the Registrar by u to attend.			

Mail completed form(s) and check payable to Scottish Weekend to: SW Registrar 12218 Fleming Ln Bowie, MD 20715