



Hmong American Center, Inc.

1109 6th Street. Wausau, WI 54403 | Tel: (715) 842-8390 | Fax: (715) 842-9202

2015-2016 Wausau Area Hmong New Year Celebration **October 31 and November 1, 2015**

General Show Registration Form **Rules and Regulations**

1. Registration forms must be received by **October 23, 2015**.
2. Each participating member who will be performing, must complete the attached participation waiver form and turn the waiver form in with the registration form. For liability concerns, interested performers will not be allowed to perform unless the General Show committee chair has a copy of the completed waiver form in hand.
3. No inappropriate dancing, singing, kwv txhiaj, or acting allowed on stage which may cause harm to the participant(s) and/or audience.
4. All performing teams must report to General Show Chair upon arrival and must check in at least one hour before performing.
5. Performances may be done by a group of performers or by an individual performer.
6. All general show performances will take place on Sunday November 1, 2015 unless you or your group have been instructed to perform on Saturday October 31, 2015 by the New Year Planning Committee.
7. Mail or drop off registration form and participation waiver form to the Hmong American Center address as listed above, ATTN: Hmong New Year.

I have read and fully understand the rules and regulations established by the New Year Planning Committee.

Team Name (If Applicable) _____

Performance (circle one): **Dance** / **Sing** / **Kwv Txhiaj** / **Other (specify)**_____

Performer's Name, Signature, and Date

<i>Name</i>	<i>Signature</i>	<i>Date</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you have any questions or concerns please contact:
Sa Sor Lee (715) 212-2392

Sa Sor Lee, General Show Chair
Sa Sor Lee

See Xiong, General Show Co-Chair
See Xiong

PARTICIPATION WAIVER FORM

EACH member participating in the 2015-2016 Wausau Area Hmong New Year Celebration general show event MUST turn in a participation waiver form in order to perform. Individuals/Teams will not be allowed to participate, if any participant fails to turn in a waiver form.

**If any participant is under the age of 18, a parent/legal guardian must complete the "parental consent" information below.*

Participant:

In consideration for performing during the 2015-2016 Wausau Area Hmong New Year Celebration, I will assume responsibility for all my actions associated with the New Year. I will take reasonable precautions to ensure that I do not cause harm to myself and to other and that I will be responsible for my belongings.

I understand that I will NOT and CANNOT hold the Hmong American Center, its Board of Directors, New Year Committee, employees, volunteers, and stakeholders liable for any personal injuries, loss, accident, misfortune, or damages.

I will take full responsibilities for my actions and I will hold myself accountable for any injuries and incidents that occurs during the New Year event.

I understand that this is a public event and as a result photographs, videotapes, and other recordings may be made of me as a result of my participation in the competition events. Furthermore, I understand that the Hmong American Center and the New Year Committee may use photographs and other recordings of me in future promotions.

Signature of Participant

Printed Name

Date

Parent Consent: Required for any participant under the age of 18.

I, the parent or guardian of _____, gives my voluntary consent to have my son/daughter participate in the general show event during the 2015-2016 Wausau Area Hmong New Year Celebration.

I hereby release the Hmong American Center, its Board of Directors, New Year Committee, employees, volunteers, and stakeholders from any and all liability concerns are it relates to the event.

In the event of an accident, injury, illness, death, and/or property damage, the individuals mentioned above will not assume any responsibility or obligation to provide financial assistance or other assistance, including but not limited to, medical, health, or disability insurance.

I understand that this is a public event and as a result photographs, videotapes, and other recordings may be made of any participants as a result of their participation in the competition events. Furthermore, I understand that the Hmong American Center and the New Year Committee may use photographs and other recordings of any participants in future promotions.

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian

(_____)
Phone Number