



RISING STAR QUARTET CONTEST • July 27, 2019 • Manchester, UK

# Entry Form

Enter the 2019 Rising Star Quartet Contest, an adjudicated barbershop quartet competition for women ages 25 and younger.

### Quartet Name:

(Please note, Rising Star quartets may not have the same name as a registered Sweet Adelines Quartet. Your quartet name is subject to approval by the Competition Department.)

### Are you a registered quartet of Sweet Adelines International?

#### If yes, please provide quartet ID:

List all names as you wish them to appear in print. Please type or print clearly. By signing this form, members of the quartet confirm the accuracy of information provided and acknowledge that they have read, understand and will abide by the policies included on this form. Parent or guardian must co-sign if contestant is under 18 years of age.

**Tenor:** \_\_\_\_\_ Age: \_\_\_\_\_

Are you a member of Sweet Adelines?  Yes  No If yes, what is your member ID? \_\_\_\_\_

Attending IES?  Yes  No  Undecided

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**Lead:** \_\_\_\_\_ Age: \_\_\_\_\_

Are you a member of Sweet Adelines?  Yes  No If yes, what is your member ID? \_\_\_\_\_

Attending IES?  Yes  No  Undecided

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**Baritone:** \_\_\_\_\_ Age: \_\_\_\_\_

Are you a member of Sweet Adelines?  Yes  No If yes, what is your member ID? \_\_\_\_\_

Attending IES?  Yes  No  Undecided

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**Bass:** \_\_\_\_\_ Age: \_\_\_\_\_

Are you a member of Sweet Adelines?  Yes  No If yes, what is your member ID? \_\_\_\_\_

Attending IES?  Yes  No  Undecided

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

### Quartet Primary Contact:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### School or Chorus Affiliation:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Submit Entry Form and Fee to:

Sweet Adelines International  
Attn: Competition Department  
9110 S. Toledo Avenue • Tulsa, OK. 74137  
Fax: 1.918.388.8083  
Phone: 1.918.622.1444  
Toll Free: 1.800.992.7464

**This completed entry form and the \$100 entry fee must be received by the Competition Department at Sweet Adelines International Headquarters by May 31, 2019.**

- Entry Fees are non-refundable.
- If two (2) or more members of the quartet are registered for IES 2019, on July 25-28, 2019, \$50.00 USD of the competition fee is waived and will be refunded once verified by Sweet Adelines Region 31.
- Entry forms accompanied with payment will be accepted in the order they are received. A maximum of 20 quartets are accepted. Entry forms received after the 20 competitor slots have been filled will be placed on a waiting list.
- Drawing for order of appearance will be held once 20 entries are received or June 14, 2019, whichever is first.
- Quartets with an average member age of 16 or younger will be eligible for the Stars to Watch Award.
- There are no qualifiers to be eligible to compete in the contest. (Please note, this means you do not need to have previous participation in a Sweet Adelines contest.)

### Assignment of Recording and Film Rights

The undersigned desire to compete at the 2019 Rising Star Quartet Contest of Sweet Adelines International. In consideration of being authorized to compete at said competition, the undersigned hereby agree to the following terms and conditions:

The undersigned hereby grant to Sweet Adelines International the exclusive right to record, film, photograph and video ("Recordings") any or all of the quartet's performances during the 2019 Rising Star Quartet Contest. Sweet Adelines International is authorized to reproduce such Recordings, broadcast or allow the public performance of such Recordings. All rights to fees, commissions, royalties, or profits received as the result of the distribution, sale or lease of the Recordings in any form are assigned to Sweet Adelines International to be used in any manner consistent with the purpose of Sweet Adelines International.

### Certification of Copyright Clearance

We, the undersigned, hereby warrant and represent to Sweet Adelines International that with respect to the musical works we intend to perform at the 2019 Rising Star Quartet Contest, we have obtained from the appropriate music publishers, copyright owners, arrangers, and/or their respective agents, all licenses, grants of rights, and permissions that may be required for our performance of such musical works. (All printed music from Sweet Adelines International satisfies these requirements.)

### Release of Claims

We agree and acknowledge that we are participating in the 2019 Rising Star Quartet Contest ("Event") on our own accord. We give this acknowledgement freely and knowingly and we represent and warrant to you that we are physically and mentally fit and that, as a result, able to participate, and we do hereby assume responsibility for our own well-being.

We are fully aware that possible physical injury might occur in the Event, we hereby waive any and all rights or claims we may have as a result of participation in the Event against Sweet Adelines International, its directors, officers, employees, members, staff, and all individuals assisting in instructing and conducting these activities, and we hereby fully release and discharge them from any and all claims resulting from injuries, including death, damages or loss, which may accrue to us or our heirs arising out of or in any way connected with my participation in the Event.

We further agree to indemnify, defend, and hold harmless Sweet Adelines International, its directors, officers, employees, members, staff, and all individuals assisting in instructing and conducting these activities, from any and all claims resulting from injuries, including death, damages, or loss, which may accrue to us or our heirs arising out of or in any way connected with our participation in the Event.

**Signature:** \_\_\_\_\_

### METHOD OF PAYMENT

ONLY SUBMIT CREDIT CARD PAYMENT VIA FAX, PHONE OR POSTAL MAIL

**Check Enclosed**  
(Please make payable to Sweet Adelines International)

#### Credit Card

- Visa
- MasterCard
- Discover Card
- Amex

Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Questions? Please contact the Competition Department at Sweet Adelines International Headquarters.**

**Email:** competition@sweetadelines.com • **Phone:** 1.918.622.1444 • **Toll Free:** 1.800.992.7464