

FUSTA COMPETITION ORGANIZERS APPLICATION

This application form must be completed and submitted with a check (\$25 for a new competition, \$15 for a renewal, stamps for additional venues for the same organizer are \$15/stamp), to the National Competition Organizer Liaison (FUSTA Vice President) no later than **November 15th** in order to comply with the rules and regulations of the Scottish Official Board of Highland Dancing.

Please send your Competition Registration Form to:

Bill Weaver
200 West Essex Drive
Saint Louis, MI 48880

ORGANIZER INFORMATION

Organization Name _____
(Highland Games/Festival or Association)

Organizer's Name _____

Contact Person (if different from Organizer) _____

Mailing Address _____

City, State _____

E-mail address _____ Phone _____

Website _____

Workshop _____

Have you ever organized either a competition or a Championship before? Yes___ No___

If "No" do you have a FUSTA member on your committee as a resource? Yes___ No___

If you do not have a FUSTA member on your committee, please contact Bill Weaver.

Please fill out the Organizer information form (above) and the Competition information form on the following page(s), including competition #, and send to the address listed above. ALL Organizers MUST have your competition registration number clearly shown on your entry form.

CHAMPIONSHIP/COMPETITION INFORMATION FOR FUSTA EVENTS LIST

EVENT #1

Circle one; **CHAMPIONSHIP** **COMPETITION** **WORKSHOP**

Event Name or Competition Title _____

Venue _____

Date _____

City/Town _____ Open or Closed Event _____

Competition Registration # _____

EVENT #2

Circle one; CHAMPIONSHIP COMPETITION WORKSHOP

Event Name or Competition Title_____

Venue_____

Date_____

City/Town_____ Open or Closed Event_____

Competition Registration #_____

EVENT #3

Circle one; CHAMPIONSHIP COMPETITION WORKSHOP

Event Name or Competition Title_____

Venue_____

Date_____

City/Town_____ Open or Closed Event_____

Competition Registration #_____

EVENT #4

Circle one; CHAMPIONSHIP COMPETITION WORKSHOP

Event Name or Competition Title_____

Venue_____

Date_____

City/Town_____ Open or Closed Event_____

Competition Registration #_____

For additional events, please make a copy of this page and attach to the application form.