

**2021 Miss Majorette of Indiana  
2021 State Competition &  
Open Contest**

**Delaware County  
Fairgrounds  
1210 N Wheeling Ave  
Muncie, IN 47305  
Community Building**

**May 9, 2021**

**DEADLINE: April 9, 2021**

Doors open at 9:00 a.m

Contest Directors: Charlotte Anthony

NBTA Sanction

General Information: Due to restrictions from the CDC, we will split the contest this year. 0-6,7-9,10-12 will compete beginning at 9a.m. Awards will be given out at end of the 3 ages competing. Building will be closed and cleaned. Reopen in afternoon for 3 older divisions. Afternoon start time will be given once entries are received. Masks are required unless you are competing. Attached waiver forms must be signed and returned with entry. Lanes will be posted for events. Contest directors and/or Delaware County Fairgrounds are not responsible for injury or loss of property. Mail entries to Charlotte Anthony, 9211 E CR 25 South, Selma, IN 47383. **NO REFUNDS. NO LATE ENTRIES ON STATE, MISS MAJORETTE OR PAGEANT EVENTS. NO PHONE ENTRIES.** Entries must be POSTMARKED no later than April 9, 2021. Questions, you may email: [cjkanthony2@hotmail.com](mailto:cjkanthony2@hotmail.com) or call 765749-2590.

Novice Pageant consists of costume modeling, basic march and solo competition.

Novice Pageant is open to all twirlers not just Indiana. Modeling for All Pageants is in costume this year due to Covid 19. All pageant events WILL have an interview. All age groups will be 0-6, 7-9, 10-12, 13-15, 16+, College. A \$15.00 process fee will be charged on entries, families with more than one twirler need only pay one process fee.

**Open events**

X Strut

Solo

2 Baton

**3 Baton**

**Pageant Events**

NOVICE MISS

BEGINNER MISS

INTERMEDIATE MISS

**ADV MISS MAJORETTE**

**COLLEGE MISS MAJORETTE**

**State Events**

Solo

Rhythmic

## INDIANA STATE, MISS MAJORETTE and/or OPEN CONTEST ENTRY

Put X in box for event and level in which you wish to compete. Shaded areas are not available for entry.

**ENTRY DEADLINE: April 9, 2021**

Name: _____					
Address: _____					
City: _____		State: _____		Zip: _____	
Telephone: (____) _____					
Email Address: _____					
Birthdate: _____			Age(as of 9-1-20): _____		

### STATE EVENTS

Event	Special Nov	Novice	Beginner	Intermediate	Advanced
State Solo \$25					
State Rhythmic \$25					

### Miss Majorette of Indiana Pageant Events

\_\_\_ 1. Novice \$45      \_\_\_ 2. Beginner \$50      \_\_\_ 3. Intermediate \$50  
 \_\_\_ 4. Advanced \$50      \_\_\_ 5. College \$50

\$10 per Event

### OPEN EVENTS

Event	Special Nov	Novice	Beginner	Intermediate	Advanced
X-Strut					
Solo					
Two Baton					
Three Baton	___ One division only.				

Process Fee \$15.00: \_\_\_\_\_ (once per family)

State Events Total: \_\_\_\_\_

MMI Events Total: \_\_\_\_\_

Open Events Total: \_\_\_\_\_

Total Entry: \_\_\_\_\_

Mail entries and make checks payable to: Charlotte Anthony 9211 E CR 25 South, Selma, IN 47383.

# Indiana Miss Majorette/State NBTA 2021 Baton Competition - RELEASE OF LIABILITY FOR MINOR PARTICIPANTS

## READ BEFORE SIGNING

IN CONSIDERATION OF my child/ward \_\_\_\_\_ (child/ward name) being allowed to participate in any way in the Miss Majorette of Indiana/NBTA Indiana State related events and activities, the undersigned acknowledges, appreciates, and agrees that:

The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) to my child from the activities involved in these programs are significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and,

1. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,
2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the contest directors, judges, facility employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
5. I, the parent/guardian, assert that I have explained to my child/ward: the risks of the activity, his/her responsibilities for adhering to the rules and regulations, and that my child/ward understands this agreement.
6. I, the parent/guardian, and my ward will follow all rules related to COVID-19 as put forth by the activity director, facility, and State.

**I, FOR MYSELF, MY SPOUSE, AND CHILD/WARD, HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Name of Child/Ward: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

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

Date Signed: \_\_\_\_\_

# Facility - Participant Registration \ Waiver Form

Participant Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Parents Names (if participant is under 18): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home/Alt Phone: \_\_\_\_\_

Contact E-Mail Address: \_\_\_\_\_

Coach's Name, Group Name: \_\_\_\_\_

I accept that the Delaware County Fairgrounds is only providing me and/or my minor child an opportunity to use the facility for a special event (Miss Majorette of Indiana/NBTA Indiana State competitions). In consideration for the privilege to use this facility, I agree to assume all risks for myself and / or for my minor child and release and hold harmless the Delaware County Fairgrounds, its staff, agents, owners, officers, manufactures of equipment and material, property owners and any others having interest in the facility from all liability, negligence, causes of action, claims, demands and damages of every kind in which may arise out of my participation and / or my minor child's participation in any and all activities at this facility.

I will familiarize myself and/or my minor child (if applicable) with the rules of the games and/or the facility policies and will, to the best of my ability have him/her participate under control and avoid injury to self and other persons while using the facility.

All participants, including coaches, must sign this waiver to actively participate in any activities at the Delaware County Fairgrounds. For minor participants, under the age of 18, a parent or guardian must complete and sign this form on their minor's behalf.

BY SIGNING, I ACCEPT AND UNDERSTAND THIS WAIVER FORM AND THE FACILITY PARTICIPATION RULES. THE TERM OF THIS WAIVER IS INDEFINITE, UNLESS WITHDRAWN BY THE ADULT PARTICIPANT SIGNING OF THE PARENT OR GUARDIAN OF A MINOR PARTICIPANT UNDER 18.

X \_\_\_\_\_

PARTICIPANT \ PARENT SIGNATURE (IF PARTICIPANT UNDER 18)

DATE