

# ALL AMERICAN HALFTIME TOUR REGISTRATION

EVERY tour member (including spectators) must submit a tour registration & release of liability form with a deposit of \$300.00 per person by September 7th. Refer to the back cover of your All American brochure for the required Selection Code information. Please use Black/Blue ink to complete forms. Make checks payable to: ESP Productions

**MAIL FORMS AND DEPOSIT TO:**  
**ESP PRODUCTIONS • 4539 36TH STREET • ORLANDO, FL 32811**

**PLEASE PRINT ALL INFORMATION CLEARLY IN BLACK/BLUE INK. PLEASE DO NOT STAPLE FORMS OR CHECKS**

FIRST NAME  LAST NAME

MAILING ADDRESS

CITY  STATE  ZIP

AGE  DATE OF BIRTH  -  -  GENDER: MALE  FEMALE

HOME PHONE  -  -  CELL PHONE  -  -

**\*\* IMPORTANT \*\* E-MAIL ADDRESS REQUIRED \*\* ALL TOUR INFORMATION AND UPDATES WILL BE E-MAILED \*\***

EMAIL ADDRESS

VERIFY EMAIL

**TOUR CHAPERONE - All participants under 18 years of age must be attending with a registered Tour Spectator over 21 years old**

FIRST NAME  LAST NAME

HOME PHONE  -  -  CELL PHONE  -  -

## SCHOOL/GROUP

NAME

COACH/DIRECTOR NAME  COACH/DIRECTOR PHONE  -  -

### PLEASE CHECK ONE BOX FOR EACH OF THE FOLLOWING:

CATEGORY	PACKAGE/ROOM TYPE	T-SHIRT SIZE	Have you previously performed in the All American Halftime Show?
<input type="checkbox"/> COACH/DIRECTOR	<input type="checkbox"/> QUAD \$1179	<input type="checkbox"/> SMALL	<input type="checkbox"/> YES
<input type="checkbox"/> FAMILY/FRIEND	<input type="checkbox"/> TRIPLE \$1238	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> NO
<input type="checkbox"/> CHEER/POM	<input type="checkbox"/> DOUBLE \$1351	<input type="checkbox"/> LARGE	IF YES, HOW MANY TIMES?
<input type="checkbox"/> DANCE	<input type="checkbox"/> SINGLE \$1728	<input type="checkbox"/> X LARGE	<input type="checkbox"/> 1
<input type="checkbox"/> FLAG	Prices shown are Per Person.	<input type="checkbox"/> XX LARGE	<input type="checkbox"/> 2
<input type="checkbox"/> TWIRLER	All American Performers will add \$200.00 Production Fee.	(ADULT SIZES ONLY)	<input type="checkbox"/> 3
			<input type="checkbox"/> 4
			<input type="checkbox"/> 5+

## SELECT UP TO 3 ROOMMATES

Performers & Spectators may room together. Refer to "Tour Info" at AllAmericanHalftime.com for more roommate information.

SELECTION CODE

1. FIRST NAME

LAST NAME

2. FIRST NAME

LAST NAME

3. FIRST NAME

LAST NAME

Payment Enclosed For This Person: \$ .00

PAYMENT TYPE:  CHECK  M.O.  VISA/MC/DISCOVER

CARD #:  -  -  -

EXP. DATE:  -  3 DIGIT CODE

NAME ON CARD:

FIRST NAME

LAST NAME

BILLING ADDRESS (If different from registration address:)

ADDRESS

CITY  ST  ZIP

**Make Checks Payable to: ESP Productions**

### PERFORMER COSTUME INFORMATION:

**CRITICAL INFORMATION:** Please provide all requested measurements and select one costume size. Refer to the chart shown in "Costume FAQ" at AllAmericanHalftime.com for size. Be accurate, no fractions, round up numbers.

HEIGHT:  FT  IN

**CHILD SIZES:**

**ADULT SIZES:**

WEIGHT:  LBS

IC

SA

BUST:  IN

MC

MA

WAIST:  IN

LC

LA

HIPS:  IN

XLC

XLA

GIRTH:  IN

XXLC

XXLA

XXXLA

XXXLA

XXXXLA

**◆ ALL TOUR MEMBERS MUST SUBMIT REGISTRATION & RELEASE OF LIABILITY FORMS WITH DEPOSIT OF \$300 PER PERSON ◆**

# ALL AMERICAN HALFTIME TOUR RELEASE OF LIABILITY

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FIRST NAME

LAST NAME

HOME PHONE  -  -

CELL PHONE  -  -

PHYSICIAN NAME

PHYSICIAN DAY PHONE  -  -

PHYSICIAN NIGHT PHONE  -  -

INSURANCE COMPANY

POLICY NUMBER

GROUP NUMBER

CLAIMS PHONE  -  -

IS PARTICIPANT ALLERGIC AND/OR HYPER-SENSITIVE TO ANY MEDICATION?  YES  NO

IF YES, PLEASE LIST: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARE THERE ANY OTHER COMMENTS IN REGARD TO ANY MEDICAL TREATMENT(S), DIETARY NEEDS OR PHYSICAL CONCERNS WHICH MAY REQUIRE SPECIAL ATTENTION?  YES  NO

IF YES, PLEASE LIST: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# Please Read Carefully And Sign

I/We the undersigned Participant, (and/or parent(s) or guardian(s) of the aforementioned Participant if Participant is under 21 years of age), understand that all Participants are expected to conduct themselves in a mature manner regardless of age and the right is reserved to immediately terminate All American Halftime Show tour participation in the event of gross personal misconduct or violation of Tour Policies by any person. Participants under 18 years old must be accompanied by an adult tour member over 21 years of age.

I/We understand that a high level of performance is expected from each Participant. With this in mind, rehearsals will be long and strenuous and will take place regardless of weather conditions and/or conditional rehearsal facilities.

I/We understand that Entertainment Special Productions, Inc. will engage operational staff to generally administer the performance tour. Entertainment Special Productions, Inc. does not hold responsibility for chaperoning Participants. It shall be further understood that an assigned staff member may not be at a Participant's side at all times during scheduled events or during "free time."

I/We hereby grant permission, and hold harmless, Entertainment Special Productions, Inc., and/or its assignee(s), and/or medical personnel, and/or medical institution(s), to seek and/or provide any medical treatment(s) deemed necessary for prudent medical care of Participant. Authorization is granted to any attending physician to medically treat the aforementioned Participant as deemed appropriate.

I/We understand that Entertainment Special Productions, Inc. acts only as an agent for the Participant, and assumes no responsibility or liability in connection with the tour or production activities, or with companies through which accommodations, transportation, or meals are secured nor for any services of any carriage, vessel, aircraft, conveyance, or company used wholly or in part, in the performance of its duty to passengers, nor for any act, error, or omission, or any injury to person or property, loss, accident, delay, or irregularity, which may be occasioned by reason of any defect in any vehicle or through neglect of any company or person engaged in carrying out activities specified in the tour itinerary.

I/We hereby grant permission to reproduce any images of Participant recorded by any photographer and videographer during the production tour for any promotional or commercial purpose.

I/We understand that in the circumstance of any scheduled event or the entertainment production is modified or canceled due to inclement weather, unacceptable field conditions (as deemed by event management), Acts of God or any other circumstances beyond the reasonable control of all parties involved, all other contractual obligations of the Participant shall survive.

I/We understand that any Participant apprehended by law enforcement authorities will be immediately disengaged from the tour without further notice or obligation whatsoever of Entertainment Special Productions, Inc.

I/We understand that all tour members (performers and spectators) must wear their All American I.D. card and bracelet at all times and that only officially registered tour members may participate in tour activities. (i.e. meals, buses, etc.)

I/We understand that all Participants must be traveling with others to fulfill your purchased room occupancy tour package. If your listed roommate(s) does not register for the production tour (or are removed from the production tour roster due to non-payment or any other reason) you will be required to upgrade to a lower room occupancy tour package at an additional per person cost.

I/We understand that performer Participants must ride tour transportation to all scheduled events. Performer Participants may not take a personal vehicle to any scheduled event, even if they are riding with a parent or group chaperone. In the event a performer Participant leaves the hotel property in a personal vehicle during free time, the Participant must be accompanied by an adult or chaperone over twenty-one years of age. The performer Participant and adult chaperone are required to check out at the ESP Information Desk. The performer Participant and adult chaperone must check in at the ESP Information Desk upon return to the hotel. This may only occur during free time.

I/We understand that Entertainment Special Productions Inc. has no control of television coverage.

I/We have read all of the tour information, understand and agree to all of the Tour Policies, including payment and event schedules and refund policy for cancellations.

\_\_\_\_\_  
 Signature of Participant

\_\_\_\_\_  
 Signature of Parent/Guardian if Participant is under 21 years.

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

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