

IPAF 2016

Saturday, April 23, 2016

For Office Use:
Payment:

West Valley High School Auditorium 8301 East Buckeye Avenue Spokane, Washington
SPONSORSHIP AND SUPPORT Deadline for entry: **March 26, 2016**

Fiscal and in-kind donations are a great way for you or your company to show your support for a positive community arts event. Major contributors will be noted at all other INDA events, Broadway and professional master classes, and on the website.

Donations and support from individuals and companies like yours help INDA meet the fiscal goal to make IPAF 2016 available to everyone. Monetary donations are direct assets while donations of goods and services are the basis of the Silent Auction. Results of the auction are announced during the festival. Hotel stays, artwork, health services, classes, clothing, as well as performance tickets have been donated by community supporters.

Sponsor Name for marketing: _____

Contact Name: _____

Contact Mailing Address: _____

Contact Information: _____

Daytime Evening Cell E-mail

SPONSORSHIP BENEFITS FOR INDIVIDUALS, BUSINESSES & FOUNDATIONS:

Principal (\$500+): All Soloist Sponsorship Benefits, plus
Company Banners at the event Banner advertisement and company site link on INDA website
Company Logo on event T-shirt

Soloist (\$300 - \$499): All Duet Sponsorship Benefits, plus
Name on all marketing as Major Sponsor Company Name Listed on event T-shirt
Name on all advertising fliers

Duet (\$100 - \$299): Announcement from the stages acknowledge your support at the event
Name posted at event

Trio (\$50 - \$99): Name posted at event

SILENT AUCTION: Items will be displayed with your company name listed.

Description of Silent Auction Item: _____

DONATIONS FOR PRIZE DRAWING: Items will be displayed with your company name listed.

Description of Prize Drawing donation: _____

Retail Value of Silent Auction/Prize Drawing donation Item(s): _____

Is Item(s) a gift certificate? Yes No If yes, please list all restrictions and give contact information to redeem: _____

- Auction Item/Prize Drawing donation is with this form.
- Auction Item/Prize Drawing donation to be delivered by April 16th to 4120 S. Sullivan Rd, Veradale.
- Auction Item/Prize Drawing donation needs to be picked up at: _____
- Auction Item/Prize Drawing donation will be delivered to the festival.

All contributions are tax deductible within the limits prescribed by law. INDA is a 501(c)3 Non Profit.

Please make check payable to: **Inland Northwest Dance Association, Inc.**

Mail to: INDA PO Box 1133 Veradale WA 99037-1133

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For Office Use: Booth #

Payment:

West Valley High School Auditorium 8301 East Buckeye Avenue Spokane, Washington
BOOTH ENTRY FORM Deadline entry fees & forms: March 26, 2016

Inland Northwest Dance Association is excited that we have the perfect space. Your booth will be located at the center of all activity near the theater, information/check-in for all performers, food area, silent auction tables, and performing arts workshop area. There is a large open quad area where you will be seen by all attendees.

GENERAL GUIDELINES FOR ALL BOOTHS:

1. Set-Up Time begins at 8:00 AM Saturday with Booth Hours of Operation: 10:00 AM - 6:00 PM
2. *NO helium balloons allowed in building*
3. All signage must be free standing. No attaching to walls or windows.
4. No food nor drink items may be sold in booths.
5. The IPAF committee reserves the right to refuse participation to anyone because of inappropriate behavior or non-compliance with its rules and regulations.
6. Booth Fee is \$40.00, non-refundable after March 26, 2016, for participation in the event. Early entries are encouraged due to space limitations.
7. Space size 10' X 10' will accommodate an 8 foot table with chairs and storage.
8. Donate an item from your booth to the vendors gift basket for the silent auction for further acknowledgement and in support of IPAF.
9. NO electricity provided: Bright lighting with no direct sun.

Group Name Listed for signage: _____

Contact Name: _____

Contact Mailing Address: _____

Contact Information: _____

Daytime

Evening

Cell

E-mail

Description of articles or activities: _____

Need 8 foot Table: Yes **Circle No**

Chairs: Yes _____ **No**
Circle, if yes, how many?

Please make check payable to: **Inland Northwest Dance Association, Inc**

Mail to: INDA PO Box 1133 Veradale WA 99037-1133

For Information: Isabelle Cook 509-927-0972 email: isabelle@isabellesdancetime.com

INDA Website: www.indaspokane.com

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West Valley High School Auditorium 8301 East Buckeye Avenue Spokane, Washington
DANCE PERFORMANCE ENTRY FORM

Deadline for entry fees & forms: March 26, 2016

Please make check payable to: **Inland Northwest Dance Association, Inc.**

Mail to: INDA PO Box 1133 Veradale WA 99037-1133

◆ **FEES-15 Minutes Performance Time: \$25.00 Additional time \$1.00 per minute if available.**

Group Name for Marketing: _____

Contact Name: _____

Contact Mailing Address: _____

Contact Information: _____

Daytime

Evening

Cell

E-mail

◆ **INDA offers a chance for your group to offer 30 minutes of dance instruction in the Performing Arts Workshop Area during the event!**

Teaching Subject: _____

Teacher Name: _____

Teaching Time Slot Preferred: (Circle) **Morning Noon Late Afternoon No Preference**

◆ Information table set up at Information/Check In. This table will be available for performing groups to display flyers.

◆ **Performance Time is 15 minutes, not to be performed consecutively.** If you are interested in purchasing additional performance time, check here. Register early and include payment to guarantee your spot. Circle time slot preferred for each number. No substitutions! Show order to be determined by committee. DO NOT guess dance time length. Your number will be cut at the time you specify. Dances, including music & costumes, should be family friendly. Body glitter is NOT allowed.

◆ **Routines may only be performed with permission from choreographer(s).**

Name of Music: _____ Precise Time Length: _____

Choreographer: _____ Number of Dancers: _____ Approximate Age: _____

Do any of these dancers perform in another number? If so, Which one(s)? _____

Type of Dance & Brief Description: _____

Time Slot Preferred: (Circle) **Morning Noon Late Afternoon No Preference**

Name of Music: _____ Precise Time Length: _____

Choreographer: _____ Number of Dancers: _____ Approximate Age: _____

Do any of these dancers perform in another number? If so, Which one(s)? _____

Type of Dance & Brief Description: _____

Time Slot Preferred: (Circle) **Morning Noon Late Afternoon No Preference**

Name of Music: _____ Precise Time Length: _____

Choreographer: _____ Number of Dancers: _____ Approximate Age: _____

Do any of these dancers perform in another number? If so, Which one(s)? _____

Type of Dance & Brief Description: _____

Time Slot Preferred: (Circle) **Morning Noon Late Afternoon No Preference**

Copy this form for additional numbers. Further performer information: Gail Bongiovanni 509-922-4493
email: gaildancer@juno.com Inland Northwest Dance Association, Inc. Website: www.indaspokane.com