

FANTASM'S CREATURE CALL COSTUME CONTEST ENTRY FORM

Instructions

All participants and attendees of **FANTASM** complete this form in order to participate in the **CREATURE CALL COSTUME CONTEST**. Please only one form per Participant. This form must be completed in black or blue ink and signed. Do not email this form to the convention. It must be delivered to the **Contest Coordinator** at the **Costume Contest Registration desk** prior to the start of the Event. Incomplete forms will not be accepted.

This form must be completed using the Participant's full and legal name; otherwise, the form will not be accepted, and the Participant may not participate.

If applicable, a parent or legal guardian must sign the **Parent or Guardian's Additional Release for Minors** for participants who are not 18 on or before the date that this form is signed.

The information disclosed below will be used only in conjunction with the Event and for historical purposes of documenting the Event in which the Participant is participating. Participants should expect their first and where necessary, last name will be used to identify them publicly unless otherwise noted and discussed with the **Contest Coordinator**.

Participant Information

Legal First Name: _____

Legal Last Name: _____

Date of Birth (MM/DD/YYYY): _____ Age: _____

Address: _____

City: _____

State: _____ Zip Code: _____ Country: _____

Home Phone Number: _____ Mobile Phone Number: _____

Email Address: _____

Emergency Contact Name/Phone: _____

Costume Information

Character Name: _____

Series Name: _____

Contest Category You Are Entering: _____

Hours of Work: _____

Materials and Details of Costume Construction Process: _____

Previous Contest Award(s) & Which Costume(s): _____

Skit Entries Only Brief Description of Your Skit: _____

My signature below establishes that I have carefully read the **FANTASM Participation Terms and Conditions and General Liability Release and Waiver** agreement, that I fully understand the same, and is proof of my intention to execute a complete and unconditional **WAIVER & RELEASE** of all liability to the full extent of the law. I am 18 years of age or older and mentally competent.

Participant Signature: _____ Date: _____

Parent or Guardian's Additional Release for Minors

In consideration of (the "Minor") being permitted by **FANTASM** and **Encompass Entertainment, LLC.** to participate in the Events, I the undersigned represent and affirm that I am the parent or legal guardian of the Minor whose name appears above. I understand and agree that the above terms and conditions apply to the Minor and to me. I further agree to indemnify and hold harmless **FANTASM** and **Encompass Entertainment, LLC.** from any and all claims which are brought by, or on behalf of the Minor, and which are in anyway connected with the Minor's participation in the Events.

Print Parent or Guardian Name: _____

Parent or Guardian Signature: _____

Relationship to the Participant: _____