

The 32nd Annual
**CENTRAL FLORIDA
SCOTTISH
FESTIVAL &
HIGHLAND GAMES**

**Saturday & Sunday
January 17 & 18, 2009**
*Highland Dance
Competition SE-11-FL*
Rain or Shine

**Central Winds Park
Winter Springs, Florida**
7m E of I-4 on Hwy 434

RULES & REGULATIONS

- Entries must be received by January 10, 2009. Entries will not be recorded until payment is received. Do not email or phone in your entry. Late entries+\$10.00.
- Any competitor not present when called for an event will be disqualified for that event.
- CFSHG reserves the right to add, remove or change events or schedules as long as they fall within the scope of the SOBHD rules for competition and are in the best interest of the CFSHG.
- Ages are computed as of the day prior to competition. Proof of age must be furnished if requested. Age groups will be according to entries received by due date.
- Competitors must remain in costume until awards are complete.
- SOBHD rules will govern all events. Judges' decisions are FINAL. Complaints must be in writing and accompanied by a \$10.00 fee.
- MOST PROMISING BEGINNER Judges' Award
- DANCER OF THE DAY & FLORIDA DANCER OF THE DAY based on aggregate points.
- CASH AWARDS SATURDAY for Four Premier Age Groups: \$35 - \$25 - \$20 - \$15 - \$10 - \$5
- CASH AWARDS SUNDAY for Two Premier Age Groups: \$35 - \$25 - \$20 - \$15 - \$10 - \$5

All DANCERS are required to purchase a ticket to each day of the games at which they are competing.

SATURDAY PrePremier Competition begins at 9am

Primary (*medals only*)

- 1) 16 Pas De Basques
- 2) 6 Pas De Basques & 4 Highcuts
- 3) Fling (4)
- 4) Sword (2 & 1)

Beginner

- 5) Fling (4)
- 6) Sword (2&1)
- 7) Sean Triubhas (3 & 1)

Novice

- 8) Fling (4)
- 9) Sword (2&1)
- 10) Sean Triubhas (3 & 1)

Intermediate

- 11) Fling (4)
- 12) Sword (2 & 1)
- 13) Sean Triubhas (3 & 1)

PM EVENTS Scheduled for 1:00pm

Premier (*overall award based on 14-17*)

- 14) Highland Fling (6)
- 15) Sword Dance (2 & 2)
- 16) Sean Triubhas (4 & 2)
- 17) 2009 Reel of Tulloch
- 18) Group Choreography (separate entry fee)

SUNDAY ALL Competition begins at 10:30 am

Beginner

- 19) Scottish Lilt (4)
- 20) Flora MacDonald (4)
- 21) ½ Tulloch

Novice

- 22) Scottish Lilt (4)
- 23) Flora MacDonald (4)
- 24) ½ Tulloch

Intermediate

- 25) Scottish Lilt (4)
- 26) Flora MacDonald (4)
- 27) Sailor's Hornpipe (5)

Premier (*overall award based on 28-30*)

- 28) Irish Jig *Scottish Version* (4 & 1)
- 29) Flora MacDonald (4)
- 30) Sailor's Hornpipe (5)
- 31) Solo Choreography (separate entry fee)

**CFSHG COMPETITION
ENTRY FORM**

Name:

Address:

City: _____

State: _____ **Zip:** _____

Country: _____

Telephone: _____

DOB: _____

Age on 1/16/09: _____

Email :

**ALL DANCERS MUST HAVE A
CURRENT WORLDWIDE
REGISTRATION CARD TO
REGISTER ON THE DAY OF THE
GAMES.**

Events Entered:

Please sign and return with your entry

form: *I have read and understand the rules and regulations as printed in this brochure and wish to be entered in the events shown above. I hereby for myself, (my child), my heirs, executors and administrators, waive and release any and all rights and claims that I (my child) may have for damages against the Central Florida Scottish Highland Games (hereafter known as the Games), its agents, trustees, representatives, officers and/or employees, for any injuries which may be suffered by me (my child) the Games and/or any function related to the Games and the Games weekend. I warrant that I (my child) am (is) in good health and with no physical condition which would prevent me (my child) from participating in any events listed on this form or included with this entry. I (my child) agree (s) that photographic reproductions of any sort which may be taken of me (my child) while participating in the events listed on this form, as well as the use of my (my child's) name may in any manner be used by Games or the Scottish-American Society of Central Florida, Inc (SASCF, Inc) or any person, partnership, corporation, or association authorized by the or the SASCF, Inc. I (my child) have (has) read and agree to act in accordance with these rules and those of the SOBHD.*

SIGNATURE :

(parent or guardian if under 18)

Date: _____

Mail Entries to:
**CFSHG Dance Competition
c/o CDPA**

PO BOX 771518
Winter Garden, FL 34777-1518

**Enclose a self-addressed, stamped envelope
to receive DANCER Parking Pass.**

**CHOREOGRAPHY
ENTRY FORM**

Solo Entry:

NAME:

NAME of DANCE:

Group Entry:

NAME of SCHOOL:

TEACHER CONTACT:

NAME of DANCE:

Number of Dancers: _____

Choreography Entry Fees:

\$20 per solo entry

\$35 per group entry

AWARDS

Prize Money and Medals will be awarded
for top three places in Choreography
Events.

Solo \$50 \$30 \$20

Group \$100 \$75 \$50
