# PHILCON 2023

#### **Masquerade Registration**

Name:	Email:	Phone:			
Young Fan [under 13]	Adults	All Entries			
☐ Self-Made ☐ Adult-Made	☐ Novice ☐ Journeyman ☐ Craftsman ☐ Master	☐ Original ☐ Re-Creation ☐ Historical ☐ Anime ☐ Other Media			
Costume Title: Theme					
Costume Source: Designer(s):		□ Science Fiction □ Fantasy □ Horror □ Myth □ Romantic			
		☐ Humorous			
Number of Entrants:	Dominant Colors				
Attach sheet with additional nar group coordinator's name at top	□ Black □ Brown □ Red □ Orange □ Yellow □ Green □ Blue □ Violet □ Grey □ White □ Gold □ Silver □ Flesh □ Multi				
have: USB Emailed Audio Script Documentation (Required for Re-Creation Costumes)					
Fitle of Recorded Material:	Performe	r:			
nstructions to MC					
Read standard intro  (Entry number, division and title)  Read Intro  (Entry number and division)  (Info to be read in black out or before presentation starts)  Read Script  (Script to be read during Presentation)  Be Part of Presentation  (Requires active participation from MC)  Read title after entry is over					
Attach script or set-up on additional sheet. Include costume title and costumer's name (or group coordinator's name) at op of sheet.					

If you have a request for a special tech effect or want the MC to be part of the presentation, please give details:

Masquerade Staff Only:	
Entry Number:	

### PHILCON 2023 Masquerade Release

Costume Title:	
I/We have read and understood the rules of the Philcon Masquerade and permit photography and/or videotaping and also agree to permit the use and/or videotapes subject to permission from the Philadelphia Science F I/we agree to hold the Convention, its organizers, and the facility both se accident and/or injury suffered by me/us during the course of this Masque part of those cited above.	, sale, and/or dissemination of said photographs Fiction Society/Philcon ("Convention"). Further, everally and individually blameless for any
Print name	
If this is a group entry, we must have signatures from all entrants. (forms; each form must have the costume title entered above.)	Group members may sign different release
If entrant is a minor, parent or guardian must sign the release.	
Contact Information	
Contact Name:	Phone:
Mailing address:	
City:	State/Province:
Zip/Postal Code:E-mail:	
Hotel Room Number:	
Best Contact Method at the Convention:	

#### **MASQUERADE TECH FORM**

Costume Title:		En	trant #:
Division:	Dominant Color:	# o	f people:
Contact person(s):		Cell Phone	#:
Preset in Blackout? ☐ Yes ☐ N USB? ☐ Yes ☐ No File Name:	lo	Script? ☐ Yes ☐ No Emailed Audio? ☐ Yes ☐ No	
MC will read entrant number ar  ☐ And Costume Title ☐ at be ☐ or on ☐ And a set-up (read before pres	ginning ly at end	☐ And a Script (read during (written/printed/recorded me☐ And be part of presentation	edia)
☐ Be present on stage ☐ Enter as lights come up on come	ue:	Where?	
Sound:		☐ Starts on cue:	
☐ Up on cue:	_ Color?	Backlight? ☐ Yes ☐ No	
During Presentation: Sound:  ☐ Stop sound on cue:			
Lights: ☐ Change on cue:			
Exit instructions: Costumes will:	☐ Exit in light	By who?:	
Sound ☐ Fade down when costumes €	exit		
Lights ☐ Stay on ☐ Fade out (to coul	nt) on cue:		
☐ Black out fast on cue:			

## **Workmanship Judging**

This section to be completed by contestant:	
Entry#: Division:	□ Original <i>or</i> □ Recreation
Contestant Name(s):	
Entry Title:	
Parts to be Judged:	
Special Information for the Judge:	
This section to be completed by the judge:	
Parts Judged:	
Notes:	
Awards Presented (if any):	