

DIRECT ARCHDIOCESAN DISTRICT  
**PARATHOSI**  
*A Celebration of Hellenic Heritage & Dance*

**PARATHOSI 2025 Parish Intent to Participate**

Please return all completed documents and registration packets no later than **December 1<sup>st</sup>, 2024** to:  
[PARATHOSI@goarch.org](mailto:PARATHOSI@goarch.org). PLEASE NOTE: All documents are now PDF fillable and should be filled out electronically. Please return all documents as an electronic file only!

Parish Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Proistamenos: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Anticipated Number of Participants: \_\_\_\_\_

Please give us your best estimate to assist in our planning. Participation begins at 7 years old and is open to all youth and young adults that of the Direct Archdiocesan District. Please refer to the Informational Packet or Director's Packet for group divisions and a breakdown of average ages.

**\*Attach additional sheets if necessary\***

Dance Troupe Name: \_\_\_\_\_

Director Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Average age of Troupe Members: \_\_\_\_\_

Approximate Number of Troupe Members: \_\_\_\_\_

Dance Troupe Name: \_\_\_\_\_

Director Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Average age of Troupe Members: \_\_\_\_\_

Approximate Number of Troupe Members: \_\_\_\_\_

Signature of Proistamenos: \_\_\_\_\_ Date: \_\_\_\_\_

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**PARATHOSI 2025 Code of Conduct for Director Participation**

Please be certain that you read and understand this document PRIOR to signing

I will come to PARATHOSI with an open mind and heart, ready to participate in all aspects of the program to the best of my ability.

I will treat the clergy, my advisors, my fellow participants, and visitors with respect while at PARATHOSI. I will use appropriate language and will not curse, use obscene hand gestures, or participate in vulgar conversations. I will not harass my team, fellow directors and their teams, or visitors in any way. I also understand that fighting, "rough housing," and physical or verbal bullying are strictly prohibited and may result in being sent home and my team's elimination.

I will treat the property of others and the event with respect. I understand that I am responsible to pay for any property I willfully or recklessly damage, destroy, or steal.

I will wear appropriate clothing while at PARATHOSI and abide by the appropriate dress standards. None of my clothing will exhibit inappropriate language or images nor advertise the use of alcohol, tobacco, drugs, weapons, or violence. I will wear clothing that exhibits Christian ethos.

I will observe all rules posted and verbally communicated during the event.

I understand that possession or use of alcohol, illicit drugs, controlled substances and weapons are not allowed at any time by anyone. If I have in my possession or use alcohol, drugs, controlled substances or weapons at any point during PARATHOSI, I am subject to being sent home immediately.

I understand that PARATHOSI reserves the right to send home any director or participant who does not follow the guidelines of PARATHOSI.

I have read and understand the Participant Agreement and with my electronic signature I have agreed with all the above statements.

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Director registration will not be considered complete until this signed form has been received.*

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**PARATHOSI 2025 Group Registration**

**Instructions:** You must fill out this form completely! There must be at least one chaperone for groups with 10 participants and under, two for groups over 10, and three for groups over 20. Chaperones must be at least 21 years old and must provide a cell phone number where they can be reached during the day.

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**Group Information:**

Troupe Name: \_\_\_\_\_ Parish: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Director's Name: \_\_\_\_\_

Director's Cellphone: \_\_\_\_\_

Co-Director's Name(s): \_\_\_\_\_

**Chaperone Information:**

Full Name: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Cellphone: \_\_\_\_\_

**\*VERY IMPORTANT: Each Troupe will need its own Roster Registration Form!\***

# Group Roster:

Dancer's First & Last Name

Age

T-Shirt Size

1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____
21.	_____	_____	_____
22.	_____	_____	_____
23.	_____	_____	_____
24.	_____	_____	_____
25.	_____	_____	_____
26.	_____	_____	_____
27.	_____	_____	_____
28.	_____	_____	_____
29.	_____	_____	_____
30.	_____	_____	_____

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**PARATHOSI 2025 Performance Registration**

**Instructions:** You must fill out this form completely! Clearly type the name of each dance or song in the order in which they will be performed. In Greek or Greek (English Phonetics). For each dance/song please write the region and village that it is from. If you do not know, please write "unknown." On the second page provided, please tell us of any special performance requests (i.e. "Our dancers will be singing their first dance acapella, please start music after we have finished the first dance"). Groups are not allowed props, special lighting, or added time for their performances. Please refer to the Director's Packet for performance competition format regarding time.

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**Group Information:**

Troupe Name: \_\_\_\_\_ Parish: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Director's Name: \_\_\_\_\_

Director's Cellphone: \_\_\_\_\_

Co-Director's Name(s): \_\_\_\_\_

**Performance Information:**

	<b>Name of Dance/Song</b>	<b>Region</b>	<b>Village</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

**Please provide a brief history of the dance(s) you will be performing, and costume you will be wearing:**

**Special Performance Requests:**