



Pro/Am Accounting Form

DEADLINE - JULY 31 Phone:
1-866-345-5154 Fax:
1-740-969-4457

Studio _____ Phone _____

Address _____ City _____ State _____ Zip _____

Contact _____ Email _____

NAME (S)	PACKAGE (A, B, C or NONE)	SINGLE DANCES (#)	PRO/AM CHAMP (#)	PRO/AM SCHOL (#)	DANCESPORT SERIES (#)	SOLO (#)		TOTAL (\$)

PACKAGES

Package A | \$645

the whole event

- Admission to ALL events
- Dinner on Wednesday, Thursday, Friday & Saturday
- Breakfast on Thursday, Friday & Saturday, Sunday
- Admission to the After Hours party
- Program

Package B | \$560

late arrival

- Admission to Thursday, Friday & Saturday events
- Dinner on Thursday, Friday & Saturday
- Breakfast on Friday, Saturday, Sunday
- Admission to the After Hours party
- Program

PACKAGE C | \$415

week-enders

- Admission to Friday, Saturday events
- Dinner on Friday & Saturday
- Breakfast on Saturday, Sunday
- Admission to the After Hours party
- Program

ENTRY FEES*

One (1) Dance-All Categories & Divisions

- \$35 per dance if on full package
- \$40 per dance if NOT on package

Three (3) Dance Championships

- \$80 per entry if on full package
- \$90 per entry if NOT on package

Four (4) & Five (5) Dance Championships/Senior/DS Series/

Six (6)-Dance/Nine (9) - Ten (10) Dance Championship

- \$100 per entry if on full package
- \$110 per entry if NOT on package

Solo Exhibitions

\$100 per entry (see rules & regulations)

Closed & Open Scholarship

\$110 per entry

*A late fee of \$20 per entry will be applied to entries received after the deadline. To avoid this penalty, please submit entries by **July 31**. Entry fees do not include admission to the Ballroom. Incomplete forms will not be processed. Faxed entries will be processed ONLY when accompanied by credit card information.

Voucher Redemption:

\$300 maximum vouchers redemption per person accepted. Vouchers are only redeemable if sent in with entry form. Vouchers presented for redemption at the competition will not be honored.

Make checks payable to: Capital Dancesport

Mail payments and entries in care of:

Brenda Burger
7227 Edenborough Court
Lancaster, Ohio 43130
Fax: 740-969-4457

CREDIT CARD INFORMATION

_____ AMEX _____ VISA _____ M/C

Card #: _____

Exp. Date: _____ Sec _____

Name on Card: _____

Address: _____

City/State/Zip: _____

Signature: _____