



Professional Entry Form

DEADLINE - JULY 31

Phone: 1-866-345-5154

Fax: 1-740-969-4457

Studio _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email Address _____

Gentleman _____ NDCA # _____

Lady _____ NDCA # _____

- Basics American Smooth W/T/F/VW
(Bronze & Silver syllabus only)
- Basics American Rhythm CC/R/SW/B/M
(Bronze & Silver syllabus only)
- Rising Star American Smooth W/T/F/VW
- Open American Smooth W/T/F/VW
- Rising Star American Rhythm CC/R/SW/B/M
- Open American Rhythm CC/R/SW/B/M
- Rising Star International Ballroom W/T/VW/F/QS
- Open International Ballroom W/T/VW/F/QS
- Rising Star International Latin CC/S/R/PD/J
- Open International Latin CC/S/R/PD/J
- Open Professional Cabaret
- Pro Theatre Arts Compulsory Event

Winners of all Open Professional divisions are invited to perform in the Showcase of Champions on Saturday evening for additional monies.

Please be prepared with a musical selection and showdance number should you win the division

Accounting Summary

_____ Basics Entries at \$100.00	\$ _____
_____ Rising Star Entries at \$100.00	\$ _____
_____ Open Entries at \$125.00	\$ _____
_____ Open Cabaret at \$125.00	\$ _____
_____ Theater Arts Compulsory at \$125.00	\$ _____

Entry fee includes admission to Ballroom for the session that you are competing. Incomplete forms will not be processed. Faxed entries processed ONLY when accompanied by credit card information.

RELEASE FORM

All persons attending this event, whether as a spectator, official, studio employee or guests of the Organizers shall be bound by the Competition and NDCA rules, and by attending this event, automatically become obliged to adhere to them. Capital Dancesport, the Hotel and NDCA accept no responsibility for any loss or theft of articles left in changing rooms, Ballroom, or Hotel rooms, or for any loss or injury sustained by persons attending this event. The submission of this entry form expressly and irrevocably waves any claim (s) arising from any loss or injury incurred at this event.

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: _____