



Studio Summary Form

Studio: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____ Email: _____

Name & PRO or AM	Package & Price	General Adm. & Meals Total	Solos #_@\$_	Adult Pro/Am				Junior Pro/Am			Amateur		Has Credit or Voucher?	Total Amount per Person
				Fstyles #_@\$_	Closed or 6 Dance Multi #_@\$_	Open, 9 or 10 Dance Multi #_@\$_	Schol #_@\$_	Fstyles #_@\$_	Multi Dance #_@\$_	Schol #_@\$_	Fstyles #_@\$_	Multi Dance #_@\$_		
John Smith/AM														
TOTAL														

Payment by Cashier's Check, Money Order or Credit Card is Required

Call to Pay by **Credit Card** (4% fee)

Make Cashier Checks/Money Orders payable to: **Cleveland Dancesport Challenge**

Total Amount Due: \$_____

To Be Respectful to the Sport, the Dress Code is:
Day Sessions & Thursday Evening (Nice Casual)
Friday & Saturday Evening (Dressy Casual/Semi-Formal)
Thank You Guests & Competitors!