COMPETITOR ACCOUNTING FORM

Contact Name: Studio Name:

Address: City: State:

Phone: Email:

FULL NAME	PLEASE CIRCLE	ADULT PRO-AM SINGLE DANCES	JUNIOR SINGLE DANCES	SOLOS	OPEN SOCIAL 3-DANCE EVENTS	CHAMPIONSHIPS	SCHOLARSHIPS	CHILD LIFE CHARITY CHAMPIONSHIP	TICKET & PACKAGE ORDERS	TOTAL
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									
	PRO AM									

GRAND TOTAL $

PAYMENT MUST ACCOMPANY THIS FORM

Please make check or money order payable to:

NEBRASKA DANCE FESTIVAL
634 N 5th Street, Unit 15, Philadelphia PA 19123
Phone/Text: (215) 805-1220
Email: nebraskadancefest@gmail.com