



FINANCIAL SUMMARY

STUDIO _____ CONTACT PERSON _____ PHONE # _____ EMAIL _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PARTICIPANT'S NAME (PLEASE PRINT)	# OF SINGLE DANCES @ PRICE	# OF 2 DANCE MULTI DANCE @ PRICE	# OF 3 DANCE MULTI DANCE @ PRICE	# OF 4 DANCE MULTI DANCE @ PRICE	# OF 5 DANCE MULTI DANCE @ PRICE	# OF 6 DANCE MULTI DANCE @ PRICE	# OF 9 DANCE MULTI DANCE @ PRICE	# OF 10 DANCE MULTI DANCE @ PRICE	# OF SOLOS	# OF CHALLENGES	# OF SCHOLARSHIPS	TOTAL

ENTRIES TOTAL \$ _____

SESSION 1: THURSDAY DAY	SESSION 2: THURSDAY EVENING	SESSION 3: FRIDAY MORNING	SESSION 4: FRIDAY EVENING	SESSION 5: SATURDAY MORNING	SESSION 6: SATURDAY EVENING	AFTER PARTY
OPEN SEATING \$30 X _____ = _____	OPEN SEATING \$30 X _____ = _____	OPEN SEATING \$30 X _____ = _____	OPEN SEATING \$50 X _____ = _____ RESERVED SEATING \$80 X _____ = _____	OPEN SEATING \$30 X _____ = _____	OPEN SEATING \$50 X _____ = _____ RESERVED SEATING \$80 X _____ = _____	AFTER PARTY \$40 X _____ = _____

TICKETS TOTAL \$ _____

ADVERTISEMENTS AND CONGRATULATORY NOTICES: \$300 X _____ = _____
ON THE MAIN SCREEN IN THE BALLROOM

ADVERTISEMENT TOTAL \$ _____

CREDIT CARD

(CIRCLE ONE)

MASTER CARD AMEX VISA

SIGNATURE _____

4% SERVICE FEE ADDED TO CC PAYMENT

NAME ON CARD

CARD NUMBER _____

EXP _____ CVV _____

ZIP CODE _____

CHECKS

MAKE CHECKS PAYABLE TO
LEGACY DANCESPORT FESTIVAL

CHECK # _____

GRAND TOTAL \$ _____