

Participation Form

Triple Crown & Crown Jewel DanceSport Championships

Studio/Name _____
Street _____
City/State _____
Cell/WorkPl. _____
Email _____

This Form is Very Important!

It must accompany all entry forms. Information provided will be utilized for ordering awards, reserving accommodations and seating as well as filing taxes. Please verify all information. Particularly, the spelling of each participant's name.

A \$300 deposit per person is required to secure reservations.

Participant	Participant _____	Dates Arrive _____ Depart _____
	Type <input type="checkbox"/> Student <input type="checkbox"/> Spectator <input type="checkbox"/> Professional	Package <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> Local <input type="checkbox"/> None <input type="checkbox"/> Room only
	<i>If Professional, provide:</i>	Room <input type="checkbox"/> Sgl <input type="checkbox"/> Dbl Roommate(s) _____
	Name (Legal) _____ (Dance) _____	Non-package holder tickets (per session no.) __1 __2 __3 __4 __5 __6 __7 __8 __9
	Home address _____ _____	<i>Sign below if you agree to the release information.</i>
	Phone/Email _____	Sign X _____
	Social Sec. No. _____	
	NDCA,WDC,CDTA or USA # _____	

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