

Volunteer State Dance Challenge



Studio: _____ Email: _____
 Address: _____ Phone# _____
 City: _____ State: Zip _____ Fax # _____
 Contact Name: _____

GENERAL ADMISSION TICKET FORM

Price per session, No meals included
 No refunds or guaranteed seats

Name of Person	Wed Eve \$20	Thurs Day \$20	Thurs Dinner \$80	Thurs Eve \$20	Fri Day \$20	Friday Dinner \$80	Fri Eve \$40	Sat Day \$20	Sat Dinner \$80	Sat Eve \$50	Total for Each person