

# Volunteer State Dance Challenge



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

## GENERAL ADMISSION TICKET FORM

No refunds or guaranteed seats

Name of Person	Wed Eve \$25	Thurs BF \$40	Thurs Day \$25	Thurs Lunch \$50	Thurs Dinner \$80	Thurs Eve \$25	Fri BF \$40	Fri Day \$25	Fri Lunch \$50	Fri Dinner \$80	Fri Eve \$40	Sat BF \$40	Sat Day \$25	Sat Lunch \$50	Sat Dinner \$80	Sat Eve \$50	Total