



Registration Forms



Leader's Name		NDCC #
Follower's Name		NDCC #
Teacher's Name		Style:
Showdance Title:		Showdance Length:
E-mail:		Country: Province:
Studio:		City:

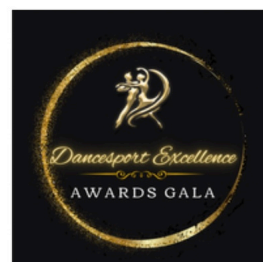
NOTE: If you wish to perform more than one Showdance please fill in a separate form

PLEASE CHECK MARK YOUR CATEGORY

AGE	Amateur	Pro - Am	Am - Am	Formation Team	SOLO
KIDS Under 12					
Kids Under 16					
Under 21					
Adult 1					
ADULT 2					
Adult 3					
Adult 4					
Adult 5					

ENTRIES DEADLINE - DECEMBER 23

FORMS OF PAYMENT:
 -CASH (IN ADVANCE - NO PAYMENTS WILL BE ACCEPTED AT THE VENUE)
 -CHEQUES DIRECTED TO : 12828197 CANADA INC.
 -E-TRANSFER TO: INFO@DANCESPORTEXCELLENCEAWARDSGALA.CA
 -ONLINE PAYMENT AVAILABLE



PLEASE SEND YOUR ENTRY FORMS AND ACCOUNTING SHEETS TO:

INFO@DANCESPORTEXCELLENCEAWARDSGALA.CA