



Ticket Order Form

Name: _____ Studio: _____
 Address: _____ City/State/Zip: _____
 Phone: _____ Email: _____

****Competitors DO NOT need to buy tickets to the sessions they are competing!!**

Ticket	Child < 12	Adult	Total
Thursday Matinee	___ x \$20	___ x \$30	
Thursday Evening	___ x \$20	___ x \$30	
Friday Matinee	___ x \$20	___ x \$30	
Friday Evening	___ x \$50	___ x \$75	
Friday Evening Admission and Dinner (Reserved seating)	___ x \$125	___ x \$150	
Saturday Matinee	___ x \$20	___ x \$30	
Saturday Evening	___ x \$70	___ x \$95	
Saturday Evening Admission and Dinner (Gala Reserved Seat)	___ x \$165	___ x \$190	
VIP Saturday Evening Admission & Dinner (Gala Reserved Seat)		___ x \$250	
Sunday Matinee	___ x \$20	___ x \$30	
All Sessions *Reserved Seating*		___ x \$260	
Workshop		___ x \$45	

Please Make Checks Payable To: KINGS BALL | Mail Entries & Payments to 1914 Haverhill Road, Baltimore, MD 21234
 Phone: 410-825-5483 | Fax: 415-795-4333
 WWW.KINGSBALL.NET | KINGSBALLDANCE@GMAIL.COM