ACCOUNTING FORM

Contact Name: _____ *Studio Name:* _____

Street Address: _____ *City/State/Zip:* _____

Phone: _____ *Email:* _____

FULL NAME	Please Circle	Package Letter & Single/ Double	Package Price	Single Dances	Solos	Challenges & WDSS	6/9/10-Dance Challenges	Scholarships	Ticket Total	Total
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
	PRO AM	S or D								
								Grand Total		

Please Make Checks Payable To: KINGS BALL

Mail Entries & Payments to 10020 Anthony Michael Cir, Bonita Springs, FL 34135

Phone: 443-838-1024 | Fax: 415-795-4333

WWW.KINGSBALL.NET | KINGSBALLDANCE@GMAIL.COM