

ASPIRE Dance COMPETITION MASTER STUDIO WORKSHEET - COMPETITION

REGISTER EARLY - ENTRIES ARE LIMITED

IMPORTANT! Studio Registration Confirmation and Competition Information will be EMAILED. Please provide a valid email.

Email _____ Phone _____
 Studio/Name _____ City Attending _____
 Mailing Address _____ City, State, Zip _____

2009 ENTRY FEES

| | | |
|---|----------------|-------|
| | RATE | |
| Number of Solos | _____ x \$75 = | _____ |
| Number of Title Solos | _____ x \$97 = | _____ |
| Number of Duets/Trios | _____ x \$87 = | _____ |
| Small Group Fee Total (From attached entry forms) | = | _____ |
| Large Group Fee Total (From attached entry forms) | = | _____ |
| Line Fee Total (From attached entry forms) | = | _____ |
| Number of Triple Crown Upgrades | _____ x \$7 = | _____ |

COMPETITION TOTAL

Competition Late Fees 10% = _____
 (less than 30 days prior to the event)

Registration Fee (per studio or independent entry) = 20.00

TOTAL ENTRY FEES \$ _____

Note. Changed entries or late entries made after the closing date will be charged an additional fee. All returned checks will be assessed a \$25 fee.

Mail To: *ASPIRE*
Address: P.O. Box 2478
 Iowa City, Iowa 52244-2478
 Ph: 319/930-7630

ENTRY CHECK LIST

1. Master Worksheet
2. Individual Entry Forms (each act)
3. Workshop Entry Form
4. Dancer Release Form
5. Rules and Regulations Agreement

NOTE. Studios qualifying for the rebate will be issued a rebate check at the venue upon check-in. DO NOT take the rebate off of your total.

Payment Information Section - No Refunds

IMPORTANT: Entries are not processed without a valid payment method.

Circle Payment Type: Check (certified funds if mailed less than 30 days prior)
 VISA
 Master Card

Charge Total: \$ _____

Credit Card Number: _____ Expiration Date _____

Cardholder Name (please print) _____

Cardholder Signature _____ 3-digit security code _____

Cardholder Address _____

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