

2019 Riverfront Dancesport Festival – Summary Form

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

#	FULL NAME (One name per line, list roommates on consecutive lines.)	Pkg Type and Cost ex: A \$000	Gen Adm. Total	Spectator Adm. Total	Freestyle Entries # __@\$ Jr. @\$	Multi Dance CL # __@\$ OP # __@\$	Solo Exhib. Entries # __@\$	Formation Exhib. Entries # __@\$	Scholar. CL # __@\$ OP # __@\$	Pro-Am Entries/ Amateur Entries	Total Per Person
1											
2											
3											
4											
5											

I qualify for the Riverfront Pot of Gold prize money - package _____ with # _____ adult entries.
 I qualify for the Riverfront Top Teacher prize money with _____ students dancing a total of _____ Scholarship and/or Multi-Dance events.
 I qualify for the Early Entry Rewards points with Entries and payment sent by the early pay deadline Dec. 15th.

Please make check made payable to and mail to
 Riverfront Dancesport Festival
 7227 Edenborough Court
 Lancaster, Ohio 43130

TOTAL BALANCE _____
CREDITS _____
GRAND TOTAL _____