

## Hollywood Participant's Order Form

(Complete for each Participant and transfer total to Studio Summary)

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Studio Name: _____ Contact Person _____					
Name: _____ Roommate(if applicable) _____					
Check in Date _____		Check out Date _____		Smoking or Non _____	
Upgrade _____					
Package and Price Information: (Prices are per person)				Pkgs w/o Hotel & Extras	
Single Full Pkgs	Double Full Pkgs	Single Pkgs(No Meals)	Double Pkgs(No Meals)	A1 (W-SU)	
AS (W-SU)	AD (W-SU)	AS*(W-SU)	AD* (W-SU)	B1 (TH-SU)	
BS (TH-SU)	BD (TH-SU)	BS*(TH-SU)	BD* (TH-SU)	C1 (FR-SU)	
CS (FR-SU)	CD (FR-SU)	CS*(FR-SU)	CD* (FR-SU)	D1 (FR)	
DS (FR-SA)	DD (FR-SA)	DS*(FR-SA)	DD* (FR-SA)	E1 (SA)	
ES (SA-SU)	ED (SA-SU)	ES*(SA-SU)	ED* (SA-SU)	F1 (TH)	
				Extra Nights	
Complete Hotel Information:			Letter Choice or Number	Total	
Package Choice					
# of Extra or Non Package Nights					
Total Package and Hotel Costs:			\$ _____		
Please Complete Dance Entry Information		#	Adult	JNR	Total
Closed and Open Single Dances					
Solos					
Other Solos (TA, Showcase, Formation)					
Novice Amateur					
Pre-Champ Amateur					
3 Dance Challenges					
Scholarships					
Championship & Superbowl					
Professional Entries					
Surcharge Per Dance					
Pro Am Non Pkg Holders					
Total Dance Entries Cost:		\$ _____			
Please Complete for Ticket and Miscellaneous Orders:		#	Cost Per Ticket or Item		Total
Dinner (Circle Days WD TH FR SA)					
Thursday Day					
Thursday Evening					
Friday Day					
Friday Evening					
Saturday Day					
Saturday Evening					
Souvenir Program					
Participation Plaque(required)					
Late Entry Fee(after deadline)					
Breakfast(Circle Days WD TH FR SA SU)					
Stargazing Package					
Total Ticket and Miscellaneous Cost:		\$ _____			
Grand Total (total of the three shaded totals above):		\$ _____			
Please transfer this total to the Studio Accounting Sheet.		\$ _____			