

Studio: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**PRO-AM STARS @SEA**  
**SUMMARY FORM**  
**PHONE: 202-681-9579**  
**EMAIL: aresdanceinc@gmail.com**  
**MAIL: 301 South Broadway,**  
**Salem, NH 03079**



Name	Pro or Am	Cabin	Single Dances	Multi Dance	Scholarship	Total

*Very Important*

**We Can Only Accept entries as long as there are Cabins Available.**

**Check With Organizer before Submitting.**

*The Sooner the Better. We would love having you Dance With Us.*

Total Amount Due: \$ \_\_\_\_\_

