

Studio: _____ phone: _____

Address: _____ email: _____

City: _____ State: _____ Zip: _____

Name	# Single Dances		# 2-Dance Multi-Dances		# 4-5 Dance Multi-Dances		# Scholarships		# Solos		# Amateur Events		# PRO Events		total
		\$		\$		\$		\$		\$		\$		\$	
															\$
															\$
															\$
															\$
															\$
															\$
															\$
															\$
															\$
															\$
															\$
															\$
												(from ticket order form) Total Ticket Order	\$	\$	
												(from ticket order form) Total Package Order	\$	\$	
												TOTAL DUE:	\$	\$	
												OFFICE USE ONLY (plus 4% administrative fee for credit card processing) TOTAL CHARGED	(4%) \$	\$	

Send completed entry forms with payment to: Great Gatsby Gala, 325 Lexington Street, San Francisco, CA 94110