



# PRO-AM ACCOUNTING FORM

Contact Name:

Studio Name:

Address:

City:

State:

Zip:

Phone:

Email:

FULL NAME	PLEASE CIRCLE	ADULT PRO-AM SINGLE DANCES	JUNIOR PRO-AM SINGLE DANCES	SOLOS	NIGHTCLUB & SHOWDANCE CHAMPIONSHIPS	NEWCOMER & BRONZE CHAMPIONSHIPS & SCHOLARSHIPS	SILVER CHAMPIONSHIPS & SCHOLARSHIPS	GOLD & OPEN CHAMPIONSHIPS & SCHOLARSHIPS	6, 9 & 10 DANCE CHAMPIONSHIPS	PACKAGES	TOTAL FROM TICKET ORDER FORM	TOTAL
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											

**PAYMENT MUST ACCOMPANY THIS FORM**  
 Please make check or money order payable to:

**AMERICAN STAR BALL**  
**421 E Lancaster Ave, Apt A8 - Wayne, PA 19087**  
**Phone/Text: (215) 805-2213**  
**americanstarball@gmail.com**

**GRAND TOTAL \$**