

Leader's Name	_____	NDCA# or WDC#	_____	DOB	MM/DD/YYYY	SS#	123-45-6789
Leader's Email	_____			Tel	_____		
Follower's Name	_____	NDCA# or WDC#	_____	DOB	MM/DD/YYYY	SS#	123-45-6789
Follower's Email	_____			Tel	_____		
Studio Name	_____	Tel	_____	Email	_____		
Address	_____	City/State	_____	Country	_____	Zip	_____

Category (please "X" all that apply)	Entry Fees
American Rhythm	
Professional Open Championship	\$100
American Smooth	
Professional Open Championship	\$100
International Ballroom	
Professional Open Championship	\$100
International Latin	
Professional Open Championship	\$100
Professional Open Cabaret	
Showdance Title: _____	\$100
Total Fees: _____	

ADDITIONAL INFORMATION

Entry fees will be waived for all professionals attending on package. (If only one member of the partnership is on package 50% of the entry fees are due)

Professional entry fees include admission to the ballroom for respective competition session.

Please Make Checks Payable To: ULTIMATE DANCESPORT CHALLENGE | Fax all forms and reservations to: (610) 884-7762
Mail to: Ultimate Dancesport Challenge – 430 Walkertown Road, Exton, Pennsylvania 19341

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