



ADULT ACCOUNTING FORM

Contact Name: _____

Studio Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

FULL NAME	Please Circle	Go Wild Required Registration Fee \$100	Single Dances \$45	2-Dance Chall. \$85	3-Dance Chall. \$110	4-Dance Chall. \$145	5-Dance Chall. \$180	Scholarship \$110	Formation Team \$155	Solo Grand Challenge Scholarship \$105	Wicked Theme Dance Chall. \$185	Total
Early Pay \$:		\$95	\$40	\$75	\$105	\$140	\$175	\$105	\$150	\$100	\$180	
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
	PRO AM											
Grand Total												

Please Make Checks Payable To: GO WILD MINNEAPOLIS DANCESPORT
 Mail Entries & Payments to 16585 China Berry Ct., Chino Hills, CA 91709 | Phone: 213-800-1180
www.GOWILDMPLSDANCSPORT.com | organizer@gowildmplsdancesport.com