



Collegiate Event Entry Form

Man/Leader (First, Last Name) _____

Lady/Follower (First, Last Name) _____

College _____ **Phone #** _____ **Email** _____ **City** _____

Choose Your Age Category

Choose Your Program

	Latin				Standard				Rhythm				Smooth				
Pre-Bronze	C/R	S/J			W/Q	T/F			C/R		S/B			W/T		F/V	
Bronze	C/R	S/J			W/Q	T/F			C/R		S/B			W/T		F/V	
Silver	C/S/R			J	W/F/Q	T			C/R/SW			B		W/T/F			V
Gold	C/S/R/J			P	W/T/F/Q		V		C/R/SW/B				MA	W/T/F/V			
Novice	C/S/R			J	W/F/Q	T	V		C/R/SW			B	MA	W/T/F			V
Pre-Champ	C/S/R/J			P	W/T/F/Q		V		C/R/SW/B				MA	W/T/F/V			

Entry Prices:

\$40 Per Person Unlimited Entrees

Total (print total for all categories): _____ \$

Method of Payments:

Certified Check _____ Money Order _____ Credit Card _____ (Visa, MasterCard Only)

Credit Card Information: Visa _____ Master Card _____

Card Number: _____

3-digit code on card _____ Expiration Date _____ / _____ Signature _____

Please complete the form and mail it to: islandersdsc@gmail.com

If paying by Certified Check or Money Order, please send it together with Entry Form to address: 2011 E 27 Street, Brooklyn, NY, 11229, US.

Registration will be complete only when funds are received!!!