

presents

2019 Recital DVD Order Form



Dancer's Name:_____ Contact Name: _____

Mailing Address:_____

Contact Phone #: _____ Contact Email: _____

QTY	ITEM	PRICE (<mark>before June 1st)</mark>	PRICE (June 2 nd & after)
	11am Show on DVD	\$29	\$36
	4pm Show on DVD	\$29	\$36

	TDS Spring Purchase <u>BOTH</u> before J for \$	shows DVDs une 1 st				
[Office Use Only]						
Payment Date: Pa	ayment Method:	Total \$:	Accepted By:			
Credit Card #:		Exp Da	.te:/			
CVV Security Code:	Billing Zip Code:	*Add \$3 convenienc	e fee for all credit card payments*			