



Studio Summary

**Entry
Deadline:
June 22**

Studio: _____ Contact: _____
 Address: _____ State/Zip: _____
 Phone: _____ Email: _____

Student Name(s)	Pro/Am	Pkg/Tickets	Closed/Open Freestyles	Closed/Open Multidance	Closed/Open Scholarships	Amateur Couple	Totals
Totals							

Payment must accompany entry forms.
 Make checks payable and mail to:

**Atlanta Ballroom Challenge
 C/O Jennifer Egl
 721 Slater Mill Court
 Marietta, GA 30068**

Total Due: \$ _____

AtlantaBallroomChallenge@gmail.com
 615-986-8989