



Account Summary Form

Studio Size – (Number of competing students)

Small Studio (1 – 2) _____

Medium Studio (3 – 5) _____

Large Studio (6+) _____

Studio Name _____ Contact Person _____ Tel _____ Email _____

Address _____ City/State _____ Country _____ Zip _____

Full Name (One name per line, list roommates on consecutive lines)	Professional or Amateur	Room Type S – single D – double	Package Type & Cost	Extra Nights 1/\$177	Single Dance Entries		All Other Entries		Misc. Items	TOTAL PER PERSON
					Number	Fees	Number	Fees		

REGISTRATION DEADLINE **JULY 13, 2018**

Make checks payable to: **The NV Ball**

Mail to: The NV Ball – Brenda Burger
7227 Edenborough Ct, Lancaster, OH 43130

Email all forms to: compbrenda@aol.com

Fax to: 740.969.4457

For Registration inquiries **only** please contact:

Brenda Burger: 740.969.2431

Grand Total: _____

Deposit: _____

Balance Due: _____

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