Form **G**

San Diego Ballroom BEACH BASH

2027

Professional Entry Form

Leader: _____ NDCA# _____

Follower: _____ NDCA# _____

Studio Name: _____

Address: _____

City, State, Zip, Country: _____

Phone: _____ Email: _____

	Rising Star $100	Open $125
SMOOTH _____	☐	☐
RHYTHM _____	☐	☐
INT'L BALLROOM _____	☐	☐
INT'L LATIN _____	☐	☐
CABARET _____		☐

Pro Nite Club Jack and Jill *FREE ENTRIES* Salsa ☐ Hustle ☐ WC Swing ☐

Total Pro Entries : (1) $ _____ (2) $ _____

Session Tickets: Are included in the Pro entry fee for the session in which your event takes place.

Accounting

Rising Star

(1) $ _____

\+

Open

(2) $ _____

\- Pro Jack and Jill -

=

Total **G** Fees $ _____

Transfer to Studio Summary Form S

Form **K**

San Diego Ballroom BEACH BASH

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Credit Card / Zelle

Studio Name : _____

Credit Card

Total $ [ ]

Add: 4% Admin Fee: [ ]

Please charge this Total Amount $: [ ]

Credit Card Number: _____

Expiration Date: ____/____ Visa and Mastercard only

CVV: _____ Visa: [ ] Mastercard: [ ]

Cardholder Signature: _____

Name on Credit Card: _____

Billing Address: _____

City: _____

County: _____

State/Country: _____

Zip/Postal Code: _____

Phone Number: _____

Email Address: _____

Zelle to phone number:

619-572-2731

Must include Name and Studio

(No admin fee :)

3) Mail To:

Ballroom Beach Bash
8355 Station Village Ln. Unit 4320
San Diego
CA 92108

(See Cancellations/Refund Policy section Rules and Regulations sheet)