

Form



2025

Leader: _____

NDCA# _____

Professional Entry Form

Follower: _____

NDCA# _____

Studio Name: _____
 Address: _____
 City, State, Zip, Country: _____
 Phone: _____ Email: _____

	<i>Rising Star</i>	<i>Open</i>
	\$75	\$95
SMOOTH _____	<input type="checkbox"/>	<input type="checkbox"/>
RHYTHM _____	<input type="checkbox"/>	<input type="checkbox"/>
INT'L BALLROOM _____	<input type="checkbox"/>	<input type="checkbox"/>
INT'L LATIN _____	<input type="checkbox"/>	<input type="checkbox"/>
CABARET _____	<input type="checkbox"/>	<input type="checkbox"/>

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) \$

=

Total G Fees \$

Transfer to Studio Summary Form S

Form



Early Bird Bonus Deadline, entries, March 1st, 2025

Studio Name: _____
 Contact Name: _____
 Address: _____
 City, State, Zip: _____
 Contact Phone: _____ Email: _____

Accounting Summary Form

Accounting Summary Form

A - Adult Pro-Am Single Dance - Closed and Open **D - Pro-Am under 18**
Bm /BSch - Adult Pro-Am Multi Dance and Scholarship **E - Little Squirt, Pre-Teen, Youth** **G - Professional**
C - Pro-Am and Am/Am Solos **F - Amateur Multi Dance** **H - Meal Packages**

How To Enter

1) Complete Entry and Release Forms

Fill out any applicable A through M Entry Forms.
 Transfer the A through M Entry Form Totals to this Accounting Summary Form.
 Have the Release Form signed by all participants.

2) How to Pay

Prior to March 21st 2025:
 Enclose a Check/ Money Order or fill out the credit card authorization form: made out to: **Ballroom Beach Bash**
For paying with credit card see credit card submittal form K
After March 21st 2025:
 You can pay by Zelle, Cash, Cashiers Check or Credit Card only (no Studio or personal checks accepted).

3) Mail All Forms and Payment To:

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

Competitor Name and if Am or Pro	Age level	Am or Pro	Pro-Am					If Sent with Check March 1st Deduct Early Bird Bonus Rebate	Amateur			Pro		Total per person \$	
			Forms							Forms			Meal Packages		
			Pro-Am Single A \$	Pro-Am Multi B_m \$	Pro-Am Sch B_{Sch} \$	Solos C \$	Under 18 Single D \$		Under 18 Multi E \$	Amateur Multi F \$	Pros G \$	H \$			
Example: Susan Sanders	A2	Am	800	225	125	175	(24)						1276		
Susan Sanders (using 2nd age category entry)	A1	Am	200	100			(6)						294		

Accounting Summary Form Total \$

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



Zelle / Credit Card / Checks

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: _____

Credit Card

Name on Credit Card: _____

Billing Address: _____

City: _____

County: _____

State/Country: _____

Zip/Postal Code: _____

Phone Number: _____

Email Address: _____

Zelle

Zelle to phone number:

619-572-2731

Must include Dancers Name and Studio

(No admin fee :)

Checks

Mail checks to:

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

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