ACCOUNTING SUMMARY FORM

Deadline for entries: Jan. 19 ,2019

Studio Name: _____ Primary Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone/Cell: _____ Email: _____

Full Name (one name per line, list room-mates on consecutive lines)	Pro/ Am	Packages		Total Non Pkg Admission (Use ticket Order form)	Single Dances		Multi-Dance Champs/Scholarships		Other Entries & Credits (Please describe type/cost)	TOTAL per person
		Pkg type & Cost	Pkg D Session Day___ Evening___		Qty	Total Cost	Qty/Type	Total Cost		

Make checks payable to California Open & mail to:

California Open ◆ 13949 N. Steprock Canyon Place ◆ Oro Valley, AZ 85755

TOTAL: $

Upon receipt, along with your payment, we will email a receipt for your review.
Questions? Call Debbie @ 520 820.0900 in Arizona. Email: californiaopen@gmail.com