



# PRO-AM

**MARCH 25TH, 2017**

**CENTRE DES LOISIRS VILLE ST-LAURENT**  
 1375, RUE GRENET, VILLE ST-LAURENT H4L 5K3

## INSCRIPTION

Deadline March 4th, 2017

No inscription by phone

## TICKET

Juvenile & Junior 20 \$  
 Adult 40 \$

TEACHER'S NAME :  
 Family name and first name

ASSOCIATION #:

**INDIVIDUAL DANCES** AGE CATEGORIES Junior 15 and under // Adults : A : 16-35 ; B : 36-44 ; C : 45-54 ; D : 55 and over  
 DIVISION Newcomer // Interm. Bronze // Bronze // Interm. Silver // Silver // Gold

INTERNATIONAL STYLE	STUDENT'S NAME	CLOSED OR OPEN	AGE CATEGORIE	DIVISION	W	T	VW	F	QS	C	R	S	PD	J

AMERICAN STYLE	STUDENT'S NAME	CLOSED OR OPEN	AGE CATEGORIE	DIVISION	W	T	F	VW	PE	C	R	SW	B	Ma	Me	Sam	TA	WCS	Sal	H	

**3 DANCE CHAMPIONSHIP** AGE CATEGORIES JUV : 5-11 // JUN : 12-15 // A : 16 and over // B : 36 and over // C : 51 and over // D : 61 and over  
 DIVISION Bronze // Silver // Gold

STUDENT'S NAME	CLOSED OR OPEN	AGE CATEGORIE	DIVISION	BALLROOM (W/T/F)	LATIN (C/R/S)	SMOOTH (W/T/F)	RHYTHM (C/R/SW)

RESPONSIBILITY will not be accepted by the Organizer for LOSS or THEFT of articles left in changing rooms or ballroom. Neither will the Organizer be held liable for injuries sustained by persons attending DANSE ELITE.

Please mail to  
**Studio 2720**  
 2720, des Ormeaux  
 Montréal (Québec)  
 H1L 4X7

Studio's Name :
Address :
City :
Postal code :                      Tel. :                      E-Mail :
Signature :

Tel. : 514-354-2210  
 Fax : 514-354-2283  
**2720mtl@gmail.com**

www.studio2720.ca  
 www.dansesportmontreal.com

Inscription - Single Dance	_____ @ 23 \$* = _____ \$	<table border="1"> <tr><td>Total</td></tr> </table>	Total
Total			
Inscription - Single Dance Junior	_____ @ 15 \$* = _____ \$		
Inscription - 3 Dance Championship	_____ @ 30 \$* = _____ \$		
Inscription - Junior Championship	_____ @ 20 \$* = _____ \$		
Admission Adult	_____ @ 40 \$* = _____ \$		
Admission Junior (15 and under)	_____ @ 20 \$* = _____ \$		

\*Taxes included

Pay by certified check, money order at <b>Studio 2720</b> , or by credit card	Name on card <b>PLEASE CAPITAL LETTERS</b>		Date
	Card #	Signature	
	Expiration Date	Postal Code/Zip	