

Caribbean Dancesport

Classic

Ticket Order Form



November 5th – 10th, 2024

Return to:

42 8th St Unit 3514

Charlestown, MA 02129

Email :

info@caribbeandancesport.com

Studio Name:		
Address:		
City:	State:	Zip Code:
Email:	Phone:	
Credit Card Number:		
Expiration:	Sec Code:	
Card Holder Signature X _____ <i>I have read and understand the rules and the cancellation policy</i>		
All major credit cards accepted at no additional fee (Before October 11th)		

Spectator Tickets

Advanced Purchase Deadline: October 11th

	# Tickets	Price in Advance	Price at Door	Subtotal
Wednesday:				
Wednesday Night Club Session & Welcome Party	# _____	@\$40 EACH	@\$45 EACH	= \$ _____
Thursday:				
Thursday Day Session	# _____	@\$30 EACH	@\$35 EACH	= \$ _____
Thursday Evening Session	# _____	@\$40 EACH	@\$50 EACH	= \$ _____
Friday:				
Friday Day Session	# _____	@\$30 EACH	@\$35 EACH	= \$ _____
Friday Evening Session	# _____	@\$65 EACH	@\$75 EACH	= \$ _____
Saturday:				
Saturday Day Session	# _____	@\$30 EACH	@\$35 EACH	= \$ _____
Saturday Evening Session	# _____	@\$65 EACH	@\$75 EACH	= \$ _____
Caribbean Dancesport Gala San Juan <i>(includes general admission to evening session)</i>	# _____	@\$199 EACH	Only Available in Advance	= \$ _____
Total Spectator Tickets:	# _____			= \$ _____