

## THE DALLAS CLASSIC SUMMARY ACCOUNTING FORM

**Contact Person** 

Studio Name:				Contact Person																	
Cell Number:	Email:																				
	One Line per Name of participant and please mark clearly if they are a *C-Competitor, *S-Spectator or *P -Professional																				
FULL NAME	C S P	SESSION 1	SESSION 2	SESSION 3	SESSION 4	VIP PACKAGE	VIP FRIDAY	VIP SATURDAY	HOTEL THU 6TH	HOTEL FRI 7TH	HOTEL SAT 8TH	LUNCH	FRI DINNER	SAT GALA DINNER	VIP PARTY	SD ENTRIES #@	MD ENTRIES #@	SCHOLAR ENTRIES #@	SOLO/ FORMATION #@	PRO ENTRY #@	TOTAL

**Hotel Deadline is 10/17/2024 Entry Dead Line is 10/25/2024** 

> Make checks payble to Smooth Operator Inc Please Mail it to: 1504 Sandstone Dr Frisco Tx 75034