

# COMPETITION DVD ORDER FORM

# HALL OF FAME

*Dance Challenge*

OFFICE USE ONLY

ORDER # \_\_\_\_\_

DATE SENT \_\_\_\_\_

COMPETITION CITY \_\_\_\_\_ COMPETITION DATE \_\_\_\_\_

**\*ORDERS WILL NOT BE FILLED UNLESS ALL NECESSARY SIGNATURES ARE BELOW\***

REQUIRED IF ORDERING ANY SOLOS

PARENT/GUARDIAN NAME \_\_\_\_\_

REQUIRED IF ORDERING ANY DUETS, TRIOS, GROUPS, ETC

TEACHER NAME \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

TEACHER SIGNATURE \_\_\_\_\_

Note: We require a teacher's signature to release choreography for any duets, trios, and groups for the protection of the choreographer.

Please indicate below where you want your DVD(s) mailed.

\*Note: Orders shipped outside of USA will be sent to the studio\*

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 EMAIL \_\_\_\_\_

All routines will appear on the same DVD  
 Please refer to the competition program for assigned numbers.  
 DO NOT use numbers from schedules printed online.

Studio Name \_\_\_\_\_

Routine/Song Name	Assigned Number From Program	Cost Per Dance
1. _____	_____	\$30
2. _____	_____	\$15
3. _____	_____	\$15
4. _____	_____	\$15
5. _____	_____	\$15
6. _____	_____	\$10
7. _____	_____	\$10
8. _____	_____	\$10
9. _____	_____	\$10
10. _____	_____	\$10

ADDITIONAL COPIES OF YOUR DVD ORDER ARE AVAILABLE FOR \$20 EACH\*  
\*(5 COPIES MAX PER ORDER)

PLEASE FILL IN ADDITIONAL DVD QUANTITY DESIRED: \_\_\_\_\_

Sub-Total \_\_\_\_\_

**SHIPPING AND HANDLING: \$5**

**GRAND TOTAL :** \_\_\_\_\_

**PRINT DANCER(S)' NAME(S) BELOW TO BE PRINTED ON THE DVD FOR CUSTOMIZATION**

**ASK ABOUT OUR DISCOUNT IF YOU ARE ALSO ORDERING PHOTOS**

Note: To qualify for a discount, photos and videos must be purchased at the same time at the competition

**Please allow 4 to 6 weeks for delivery.**

**Make checks payable to:**

**Hall of Fame Dance Challenge**

**Mail order form to:**

**Hall of Fame Dance Challenge**

**Attn: Video**

**3160 Haggerty Rd**

**Suite E**

**West Bloomfield, MI 48323-2001**

Please contact us with any questions or concerns.

Phone: 248.668.8151 Ext. 14

Fax: 248.668.8153

Email: video@halloffamedance.com

All orders must be received by  
 December 31, 2012

**METHODS OF PAYMENT (Check all that apply):**

CHECK \_\_\_\_\_ Check # \_\_\_\_\_

CASH \_\_\_\_\_

Credit/Debit \_\_\_\_\_

Please fill out all information below if paying by Credit/Debit.

Full Name on Credit Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

If card is American Express, 4-Digit Code on front: \_\_\_\_\_

Credit Card Expiration: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Credit Card Type (circle one): Visa - Mastercard - American Express - Discover