



COMPETITION REGISTRATION FORM

Date: _____

Please check all categories that you will be entering:

- PROFESSIONAL QUALIFIER AMATEUR DIVISION
- PRO-AM SALSA SHOWCASE PRO-AM SALSA HEATED DIVISION
- PRO-AM HUSTLE SHOWCASE PRO-AM HUSTLE HEATED DIVISION

Names:

1. _____

2. _____

Email Address:

1. _____

2. _____

Telephone:

1. home _____ cell _____

2. home _____ cell _____

City : _____

Payment Enclosed : _____

*Please make cheque payable to Salsa Congress and mail to :

Steps Dance Studio
1643 Dufferin St., 2nd floor
Toronto, ON
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