

## **Regional Competition Award Order Form**

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Contact Infor	mation						
Please use billing a	ddress if paying b	y credit card.					
First Name*		Last Name*		Email			
Primary Phone Numl	)er*		Secondary Phone N	Number			
Street Address*				City*			
State/Province/Region*				Postal/Zip Code*			
Order Informa	ation						
Competition Location	n (City & State)*		Performer Name				
1							
Studio Name*	Studio Phone Number						
		Туре		Quantity	Price	Total	
Category	1 <sup>ST</sup> Place Troph	-			×\$30.00		
Placement	2 <sup>ND</sup> Place Trop	-			×\$30.00		
	3 <sup>RD</sup> Place Troph	лу			×\$30.00		
Medals	Elite Platinum				× \$5.00		
	Platinum				× \$5.00		
	High Gold				× \$5.00		
	Gold				× \$5.00		
<b>Top Award</b>	Top Five				× \$15.00		
	Solo:	O Level 1 O Level 2			× \$40.00		
Awards	Soloist:	O Level 1 O Level 2			× \$40.00		
	Duet/Trio:	O Level 1 O Level 2			× \$40.00		
	Small Group:	O Level 1 O Level 2	0		× \$40.00		
	Large Group:	O Level 1 O Level 2			× \$40.00		
	Line:	O Level 1 O Level 2			× \$40.00		
	Super Group:	O Level 1 O Level 2	$C \cup Level 3$		× \$40.00		
Rising & Shining Star	Rising Star				× \$75.00		
Snining Star	Shining Star				× \$75.00		
	POSTAGE & HANDLING GRAND TOTAL DUE						
				GRAND TO	TAL DUE $-$		
Payment:	$\bigcirc$ Cash	$\bigcirc$ Check	O Mastercard	$\bigcirc$ Visa	$\bigcirc$ Disc	cover	
Released To							
	I						
		T NT de					
First Name*		Last Name*		Date			

First Name\*

**Rising Star Talent Productions** 6701 Bevelhymer Road New Albany, OH 43054 614/855-7720

Please email your completed form to <u>rstp@risingstartalent.com</u> or fax it to 614/855-7714