



REGISTRATION
1 st Edition LET'S DANCE IN PRINCIPINA
July 16/20, 2018

Name _____ Last name _____

Date and place of birth _____

SS number _____

Address _____

Dance School's name _____

Reference _____

One Style (Please specify the name of the class) _____

Amount _____

Two Styles (Please specify the names of the classes) _____

Amount _____

OPEN1Day (All classes for one day)

16th - 17th - 18th - 19th - 20th

Please Select the day

Amount _____

OPEN CARD (All classes for 5 days)

Amount _____

BANK TRANSFER TO:

A.S.D. AREA DANZA

cod iban: IT 60B0 61 75 14309 00000 67911 80

FOR: LET'S DANCE IN PRINCIPINA 1ST EDITION

please send the application form with the copy of the transfer at: letsdance@inprincipina.eu