



UNIVERSITY OF SASKATCHEWAN  
**Ballroom Dancing Club**

**Section (A): Performing Group Information** (Please Ensure All Fields Are Correct)

Performing Group Name		Performance Length
Song Title (Artist / Title / Mix)		Song Length
Dance Style	Performance Requested For <input type="radio"/> Mistletoes <input type="radio"/> Dancero	

**Section (B): Primary Contact** (Please Ensure All Fields Are Correct)

Name	
Phone	E-Mail

**Section (C): Performance Members** (Submit more than one form together to list more than 10 performers)

Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____
Name: _____	Member #: _____	Role: _____

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Form And Information Submission**

Option A: Mail	Option B: In Class Drop Off	Option C: E-Mail
Mail this form and any attachments to the club at:  University of Saskatchewan Ballroom Dancing Club PO Box 27048 Saskatoon, SK, S7H 5N9	Leave the form and all additional attachments in an envelope at the location drop-off bin.  (ask your instructor for help if required)	<p style="text-align: center;"><a href="mailto:info@uofsbdc.com"><b>info@uofsbdc.com</b></a></p>