

RECITAL/BUSINESS BOOSTER ORDER FORM
Deadline – Monday, May 14

Child's Name: _____

Parent's Name: _____

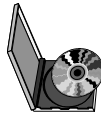
Telephone: _____

Eighth Page: \$10.00 (70 letter limit)_____

Quarter Page: \$25.00 (120 letter limit)_____

Half Page: \$50.00 (200 letter limit)_____

Choice of Graphic: Please circle graphic you would like on booster



Please make check payable to: The Dance Corner

Parent – Please Indicate: Cash: _____ Check # : _____

Received By: _____ Date: _____