



Emerald Ball

DANCESPORT CHAMPIONSHIPS

Ticket Order Form (Adults)

Deadline for Entries:
March 31st, 2024



Email to: info@emeraldball.com



Mail to: Emerald Ball
9081 West Sahara Ave, Suite 190
Las Vegas, NV 89117

Name/Studio: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Check box if you would like to be added to our email list

All Table seats in the ballroom are numbered and coincide with your ticket number. All risers are open seating; Therefore any groups wishing to sit together should order tickets at the same time. Order with care, all ticket purchases are non-refundable and non-exchangeable. Tickets are sold on a first come first served basis. All pre-ordered tickets will be held at Will Call under your name. Pick up tickets at the Emerald Ball registration desk, located within the Los Angeles Airport Hilton, 5711 W Century Blvd., Los Angeles, CA 90045.

| SESSION | Risers (Open Seating) | 2 nd Row Tables (4 seats per table) | Front Row Tables (8 Seats per table) |
|--|----------------------------|---|---|
| 1. Tuesday Day/Eve | # _____ @ \$30 = \$ _____ | # _____ @ \$40 = \$ _____ | # _____ @ \$40 = \$ _____ |
| 2. Wednesday Day | # _____ @ \$30 = \$ _____ | # _____ @ \$30 = \$ _____ | # _____ @ \$40 = \$ _____ |
| 3. Wednesday Eve | # _____ @ \$40 = \$ _____ | # _____ @ \$40 = \$ _____ | # _____ @ \$50 = \$ _____ |
| 4. Thursday Day | # _____ @ \$30 = \$ _____ | # _____ @ \$30 = \$ _____ | # _____ @ \$40 = \$ _____ |
| 5. Thursday Eve | # _____ @ \$40 = \$ _____ | # _____ @ \$40 = \$ _____ | # _____ @ \$50 = \$ _____ |
| 6. Friday Day | # _____ @ \$30 = \$ _____ | # _____ @ \$30 = \$ _____ | # _____ @ \$40 = \$ _____ |
| 7. Friday Eve* | # _____ @ \$70 = \$ _____ | # _____ @ \$80 = \$ _____ | # _____ @ \$90 = \$ _____ |
| *Premier view center tables are also available for purchase for this session. (Tables 5, 6, 17 & 18) | | | # _____ @ \$1,200 = \$ _____ <small>FULL TABLE SALES ONLY (10 seats/table)</small> |
| 8. Saturday Day | # _____ @ \$30 = \$ _____ | # _____ @ \$30 = \$ _____ | # _____ @ \$40 = \$ _____ |
| 9. Saturday Eve* | # _____ @ \$70 = \$ _____ | # _____ @ \$80 = \$ _____ | # _____ @ \$90 = \$ _____ |
| *Premier view center tables are also available for purchase for this session. (Tables 5, 6, 17 & 18) | | | # _____ @ \$1,200 = \$ _____ <small>FULL TABLE SALES ONLY (10 seats/table)</small> |
| - Season Pass (Sessions 1-9) | # _____ @ \$300 = \$ _____ | # _____ @ \$325 = \$ _____ | # _____ @ \$400 = \$ _____ |
| SUBTOTALS | \$ _____ | \$ _____ | \$ _____ |
| GRAND TOTAL FOR ALL TICKETS: | | | \$ _____ |

(A 4% administrative fee will be charged for all payments made with a credit card)

| | |
|---------------------------------|-----------------------------------|
| Subtotal: \$ _____ | + 4% Admin Fee: \$ _____ |
| PLEASE CHARGE THE TOTAL AMOUNT: | \$ _____ |
| Name on Card: | _____ |
| Credit Card Number: | _____ Exp. Date: _____ CVC: _____ |
| Billing Address: | _____ |
| City: | _____ |
| State/Country: | _____ Zip/Postal Code: _____ |
| Signature of Card Holder: | _____ |