

**FEDERATION OF DANCESPORT SOUTH AFRICA
WESTERN CAPE PAB ENTRY FORM (ROBERTSON)**

CONTACT PERSON: _____ STUDIO NAME: _____ CELLNR. _____

E-MAIL ADDRESS: _____

PROVINCE: _____

NR.	CLOTH	MALE NAME	FEMALE NAME	AGE GROUP	STANDARD	LATIN GRADE	AMOUNT
	25	KOOS KOMBUIS	MIEMIE SPENS	JUNIOR 2	LEVEL 1	SPECIAL	R100
1							
2							
3							
4							
5							
6							
78							
9							
10							
11							
12							
13							
14							
15							
ENTRIES CLOSE: 06 AUGUST2010						AMOUNT DUE	R100