

FORMULARZ ZŁOSZENIOWY PRO-AM 27.04.2019r

Zawodnik Amator

Imię i Nazwisko

E-mail i numer telefonu

Zawodnik Pro

Imię i Nazwisko

E-mail i numer telefonu

Kategorie wiekowe*

(35 lat i młodszy) A (36 lat i starsi) B (50 lat i starsi) C

First Step

Single Dance

First Step Standard	WA <input type="checkbox"/>	VW <input type="checkbox"/>
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First Step Latin	CC <input type="checkbox"/>	R <input type="checkbox"/>
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2 Dance Challenge First Step

First Step	Standard WA/VW <input type="checkbox"/>	Latin CC/R <input type="checkbox"/>
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Single Dance*

Level BRONZE STANDARD	WA <input type="checkbox"/>	T <input type="checkbox"/>	VW <input type="checkbox"/>	F <input type="checkbox"/>	Q <input type="checkbox"/>
Level SILVER STANDARD	WA <input type="checkbox"/>	T <input type="checkbox"/>	VW <input type="checkbox"/>	F <input type="checkbox"/>	Q <input type="checkbox"/>
Level GOLD STANDARD	WA <input type="checkbox"/>	T <input type="checkbox"/>	VW <input type="checkbox"/>	F <input type="checkbox"/>	Q <input type="checkbox"/>

Level BRONZE LATIN	WA <input type="checkbox"/>	T <input type="checkbox"/>	VW <input type="checkbox"/>	F <input type="checkbox"/>	Q <input type="checkbox"/>
Level SILVER LATIN	WA <input type="checkbox"/>	T <input type="checkbox"/>	VW <input type="checkbox"/>	F <input type="checkbox"/>	Q <input type="checkbox"/>
Level GOLD LATIN	WA <input type="checkbox"/>	T <input type="checkbox"/>	VW <input type="checkbox"/>	F <input type="checkbox"/>	Q <input type="checkbox"/>

3 Dance Challenge*

Level BRONZE	STANDARD: WA/VW/Q <input type="checkbox"/>	LATIN: CC/R/J <input type="checkbox"/>
Level SILVER	STANDARD: WA/VW/Q <input type="checkbox"/>	LATIN: CC/R/J <input type="checkbox"/>
Level GOLD	STANDARD: WA/VW/Q <input type="checkbox"/>	LATIN: CC/R/J <input type="checkbox"/>

SHOLARSHIP*

STANDARD <input type="checkbox"/>	LATIN <input type="checkbox"/>
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