



DANCE TEAM
UNION
NATIONAL CHAMPIONSHIP



February 16-18, 2018

HOSTED AT
THE GAYLORD PALMS RESORT
ORLANDO, FL

SPECTATOR PACKAGE INCLUDES



- *HOTEL ACCOMMODATIONS*
- *ADMISSIONS*
- *ACCESS TO ALL DTU ONSITE ACTIVITIES*
- *TRANSPORTATION TO AND FROM
ORLANDO INT'L AIRPORT*
- *ALL HOTEL AMENITIES, INCLUDING
TRANSPORTATION TO AND FROM DISNEY*
- *SOUVENIR T-SHIRT FOR SPECTATORS*

Questions?

Feel free to contact us!

WWW.DANCETEAMUNION.COM

EMAIL: INFO@DANCETEAMUNION.COM

REGISTRATION CHECKLIST

- _____ Spectator Registration Form
- _____ Hotel Package Form
- _____ Payment Form
- _____ Cancellation Policy

**DEPOSIT DUE:
OCTOBER 10th**

**FINAL PAYMENT DUE:
DECEMBER 10th**

Please send registration to:

registration@danceteamunion.com

Payments can be mailed to:

Dance Team Union

P.O. Box 538

Pasadena, MD 21123

SPECTATOR REGISTRATION FORM

DTU would like to welcome family and friends to enjoy the same exciting incentives in our National Championship packages. Please fill out one form per team and the person listed on this form will receive all important DTU National Championship information.

Team Representing		
Name		
Address		
City	State	Zip Code
Phone Number	Email	

ROOMING LIST

Deposit Due: October 10th (\$100/person)

Arrival Date:

Departure Date:

ROOM 1

T-Shirt Size

1. _____
2. _____
3. _____
4. _____

Arrival Date:

Departure Date:

ROOM 2

T-Shirt Size

1. _____
2. _____
3. _____
4. _____

Arrival Date:

Departure Date:

ROOM 3

T-Shirt Size

1. _____
2. _____
3. _____
4. _____

Arrival Date:

Departure Date:

ROOM 4

T-Shirt Size

1. _____
2. _____
3. _____
4. _____



SPECTATOR ROOMING LIST



Team Name: _____

City/State: _____

Please fill out the rooming list below. Double room packages may include a single King bed. This page should be utilized for spectators traveling on the Dance Teachers' Union package.

Arrival Date:

Departure Date:

ROOM 5	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 6	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 7	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 8	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 9	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 10	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 11	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Arrival Date:

Departure Date:

ROOM 12	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

4 Arrival Date: _____

Departure Date: _____



GAYLORD PALMS RESORT
AND CONVENTION CENTER
6000 W Osceola Pkwy
Kissimmee, FL 34746

TEAM NAME: _____

CITY/STATE: _____

SPECTATOR HOTEL FORM

***Select from the following rates.**

2 NIGHT PACKAGE

	11/15/17 RATES	12/15/17 RATES	LATE REGISTRATION
QUAD	\$219	\$229	\$244
TRIPLE	\$235	\$245	\$260
DOUBLE	\$305	\$315	\$330

**Balance due by dates above to secure rates.*

☐ 2/15 - 2/17/18

☐ 2/16 - 2/18/18

☐ 2/17 - 2/19/18

3 NIGHT PACKAGE

	11/15/17 RATES	12/15/17 RATES	LATE REGISTRATION
QUAD	\$260	\$270	\$285
TRIPLE	\$295	\$305	\$320
DOUBLE	\$415	\$425	\$440

**Balance due by dates above to secure rates.*

☐ 2/15 - 2/18/18

☐ 2/16 - 2/19/18

4 NIGHT PACKAGE

	11/15/17 RATES	12/15/17 RATES	LATE REGISTRATION
QUAD	\$305	\$315	\$330
TRIPLE	\$375	\$385	\$400
DOUBLE	\$535	\$545	\$560

**Balance due by dates above to secure rates.*

☐ 2/15 - 2/19/18

☐ 2/16 - 2/20/18

5 NIGHT PACKAGE

	11/15/17 RATES	12/15/17 RATES	LATE REGISTRATION
QUAD	\$368	\$378	\$393
TRIPLE	\$459	\$469	\$484
DOUBLE	\$660	\$670	\$685

**Balance due by dates above to secure rates.*

☐ 2/14 - 2/19/18

☐ 2/15 - 2/20/18

☐ 2/16 - 2/21/18

6 NIGHT PACKAGE

	11/15/17 RATES	12/15/17 RATES	LATE REGISTRATION
QUAD	\$430	\$440	\$455
TRIPLE	\$543	\$553	\$568
DOUBLE	\$785	\$795	\$810

**Balance due by dates above to secure rates.*

☐ 2/14 - 2/20/18

☐ 2/15 - 2/21/18

☐ 2/16 - 2/22/18

COMMUTER PACKAGE

	11/15/17 RATES	12/15/17 RATES	LATE REGISTRATION
COMMUTER	\$235	\$245	\$260

**Balance due by dates above to secure rates.*

INCLUDES REGISTRATION
AND
ADMISSIONS

***CONTACT US FOR RATES FOR EXTRA NIGHTS OR SINGLE ROOM RATES.**

All reservations are booked on a first-come, first-served basis. In the event we are oversold, DTU will provide a comparable hotel location. Transportation to and from the competition venue will be provided.

SPECTATOR PAYMENT FORM



Deposits are non-refundable. DTU accepts school checks, money orders, cashier's checks, or credit cards. No personal checks are allowed. Submit this form for each payment. Credit Card information will not be saved for automatic payments. Please select from the following payment options.

A 3.7% processing fee will be applied to credit card payments.

Contact Name : _____

City, State: _____

☐ Deposit (\$100/person) ☐ Final Payment ☐ Full Payment

☐ **School Check** ☐ **Money Order** ☐ **Cashier's Check**

CREDIT CARD:

☐ **VISA** ☐ **MASTERCARD** ☐ **DISCOVER** ☐ **AMEX**

Name on Card: _____

Billing Address: _____

City, State, Zip: _____

Phone: _____ Alt. Phone: _____

Email: _____

CREDIT CARD NUMBER:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Exp. Date: ____ / ____ / ____ **CVV Code:** _____

SIGNATURE : _____

PAYMENT INFORMATION:

DEPOSIT:

of Spectators: _____ x \$100.00 = _____

***Deposits must be received by 10/10/17 to guarantee reservation.**

TOTAL FOR DEPOSIT:

FINAL PAYMENT INVOICE WILL BE SENT ONCE REGISTRATION IS RECEIVED

FINAL OR FULL PAYMENT:

6 **Total Amount Enclosed:** \$ _____



SPECTATOR POLICY FORM

Please read over the important information listed below and sign at the bottom to acknowledge your understanding of these policies. Registration will not be accepted until this form is signed.

PAYMENT POLICY

Deposit Due Date: October 10th, 2017

Final Payment Due Dates:

Rate 1: 11/15/17 Rate 2: 12/15/17 All Others: Late Registration

Final payment invoice will be sent once registration is received. **ONLY** school checks, money orders, cashier's checks, or credit card will be allowed for payment.

CANCELLATION POLICY

Deposits are non-refundable. All cancellations must be submitted to DTU in writing by e-mail to registration@danceteamunion.com on or before the following cancellation deadlines.

DEADLINE DATE:

CANCELLATION FEE:

November 15th, 2017

\$100/person

December 15th, 2017

\$200/person

On or after December 15th, 2017 **FULL FORFEITURE**

I acknowledge that I have read all parts of this document and accept its contents. I understand that I am responsible for communicating the above information to all parties involved with this registration.

Team Name: _____

Contact Name: _____

All adults registered under this package must sign below

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____