OPEN DANCE LISTING FORM

Please fill out your year's listings and
send to: dancelistingmn@gmail.com by **by the 25 of July**.
_____ Dance Year

Club Name: _____
Facility Name: _____
Facility Address: _____
Facility Directions: _____
Contact Info: _____
Week Date 1st, 2nd etc: _____ (Place 1st SD Caller of your 1st week in the 1st caller box below.)
Day of the Week: _____
Dance Level: _____
Time Plus: _____
Time Dance:_____
Time Rounds: _____

September	**October**	**November**
RD Cuer:	RD Cuer:	RD Cuer:
SD Caller:	SD Caller:	SD Caller:
SD Caller:	SD Caller:	SD Caller:
Theme:	Theme:	Theme:
Theme:	Theme:	Theme:

December	**January**	**February**
RD Cuer:	RD Cuer:	RD Cuer:
SD Caller:	SD Caller:	SD Caller:
SD Caller:	SD Caller:	SD Caller:
Theme:	Theme:	Theme:
Theme:	Theme:	Theme:

March	**April**	**May**
RD Cuer:	RD Cuer:	RD Cuer:
SD Caller:	SD Caller:	SD Caller:
SD Caller:	SD Caller:	SD Caller:
Theme:	Theme:	Theme:
Theme:	Theme:	Theme:

June	**July**	**August**
RD Cuer:	RD Cuer:	RD Cuer:
SD Caller:	SD Caller:	SD Caller:
SD Caller:	SD Caller:	SD Caller:
Theme:	Theme:	Theme:
Theme:	Theme:	Theme:

Additional Instructions or Comments