# DanceArtfx Backside Cast List Corrections Form

**Please print or type clearly with dark ink - Make extra copies as needed - Fax to: 262-376-7771**

| Date | Studio Name | Job Number |
|---|---|---|
| | | |

## SPELLING CORRECTIONS (Return with Name Circled on Proof)

| Name Was Incorrectly Spelled | The Correct Spelling Is | Name Was Incorrectly Spelled | The Correct Spelling Is |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

## ADDITIONS

## DELETIONS

© 2010 by DANCE ART FX LLC