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| **Please send the application form by 30.03.2020**  **“Muszelki Wigier 2020” Festival Office: Suwałki Cultural Center 5 Papieża Jana Pawła II Street 16-400 Suwałki muszelkiwigier.pl**  **APPLICATION FORM**  **INTERNATIONAL SONG AND DANCE COMPETITION**  **“MUSZELKI WIGIER 2020” (WIGRY SHELLS 2020)**  CATEGORY DANCE   1. **Information about the group** 2. Group’s name ..................................................................................................... 3. Category .............................................................................................................   3. Institution entering the group for the Competition (address, phone number, e-mail) - obligatory ....................................................................................................................................  ....................................................................................................................................  4. Instructor’s name (telephone, address) ...............................................................................................  5. Number of performers .......................................................................................  6. Age of performers ..............................................................................................  7. Short information about the group (participation in competitions, achievements)………………………………………....................................................................  ....................................................................................................................................  ....................................................................................................................................  ....................................................................................................................................  ....................................................................................................................................   1. **Information about the programme** 2. Title of the choreography...................................................................................................... 3. Author of the choreography ..................................................................................................... 4. Music (if the mix it should include titles songwriters, composer)   ..................................................................................................................   1. Duration ............................................................................................................. 2. Technical requirements ..................................................................................... 3. I agree to the processing of personal data.  *Instructor’s signature Applicant’s signature and seal* | **Please send the application form by 30.03.2020**  **“Muszelki Wigier 2020” Festival Office : Suwałki Cultural Center**  **5 Papieża Jana Pawła II Street 16-400 Suwałki muszelkiwigier.pl**  **APPLICATION FORM**  **INTERNATIONAL SONG AND DANCE COMPETITION**  **“MUSZELKI WIGIER 2020” (WIGRY SHELLS 2020)**  SINGERS   1. Name and surname of a soloist or name of the group.   ................................................................................................................................   1. Birth year ............... (in case of the group, please state the birth year of the oldest member). 2. Institution entering the group/soloist for the Competition (address, phone number, email) - obligatory……………………………………………………………...........................……   ................................................................................................................................   1. Competition pieces (title, songwriter, composer )............................................................................ 2. song no 1 ...........................................................................................................   ................................................................................................................................   1. song no 2 to be performed at Jury’s request (title, songwriter, composer)   ................................................................................................................................   1. Type of accompaniment .................................................................................. 2. Technical requirements ................................................................................... 3. Short information about the soloist/group (participation in competitions, achievements)......................................................   ................................................................................................................................  ................................................................................................................................  ................................................................................................................................   1. Name and surname of the instructor...............................................................   …………………………………………………………………………………………………………………………..   1. Group consist of……………...................... girls and ................................... boys 2. Enclosed demo CD/MK - description ..............................................................   ................................................................................................................................  ................................................................................................................................ *Instructor’s signature Applicant’s signature and seal* |
| Accommodation booking Accommodation for .......................... people:  ........................ girls ........................ boys  ........................ women ........................ men ........................ driver(s),  **28/29.05.2020 29/30.05.19 30/31.05.19**  *Circle and complete if applies*  meals:  **28.05.2020** late dinner ....................  **29.05.2020** breakfast ..................... late dinner....................  **30.05.2020** breakfast ..................... late dinner....................  **31.05.2020** breakfast ……………………  **We would like to participate in workshops**  ....................................................................................................................................  ....................................................................................................................................  ....................................................................................................................................  ....................................................................................................................................  *(please state instructor’s name, number of dancers and applicant’s name)* | Accommodation booking Accommodation for .......................... people:  ........................ girls ........................ boys  ........................ women ........................ men ........................ driver(s),  **28/29.05.2020 29/30.05.19 30/31.05.2020**  *Circle and complete if applies*  meals:  **28.05.2020** late dinner ....................  **29.05.2020** breakfast ..................... late dinner ....................  **30.05.2020** breakfast ..................... late dinner....................  **31.05.2020** breakfast .....................  **We would like to participate in workshops**  ....................................................................................................................................  ....................................................................................................................................  ....................................................................................................................................  ....................................................................................................................................  *(please state instructor’s name, number of soloists and applicant’s name)* |