|  |  |
| --- | --- |
| **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)**SINGERS1. 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 bookingAccommodation 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 bookingAccommodation 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)* |