

Please send the application form by 17.07.2021

“Muszelki Wigier 2021” 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 2021” (WIGRY SHELLS 2021)**

CATEGORY DANCE

I. Information about the group

1. Group’s name
2. 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).....
.....
.....
.....

II. Information about the programme

1. Title of the choreography.....
2. Author of the choreography
.....
3. Music (if the mix it should include titles songwriters, composer)
.....
4. Duration
5. Technical requirements
6. I agree to the processing of personal data.

Instructor’s signature

Applicant’s signature and seal

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**APPLICATION FORM
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SINGERS

1. Name and surname of a soloist or name of the group.
.....
2. Birth year (in case of the group, please state the birth year of the oldest member).
3. Institution entering the group/soloist for the Competition (address, phone number, email) - obligatory.....
4. Competition pieces (title, songwriter, composer)
a) song no 1
.....
b) song no 2 to be performed at Jury’s request (title, songwriter, composer)
.....
5. Type of accompaniment
6. Technical requirements
7. Short information about the soloist/group (participation in competitions, achievements).....
.....
.....
8. Name and surname of the instructor.....
9. Group consist of..... girls and boys
10. Enclosed demo CD/MK - description

Instructor’s signature

Applicant’s signature and seal

Accommodation booking

Accommodation for people:

..... girls boys

..... women men driver(s),

16/17.09.2021 17/18.09.21 18/19.09.21

Circle and complete if applies

meals:

16.09.2021 late dinner

17.09.2021 breakfast late dinner.....

18.09.2021 breakfast late dinner.....

19.09.2021 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),

16/17.09.2021 17/18.05.21 18/19.05.21

Circle and complete if applies

meals:

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We would like to participate in workshops

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.....
.....
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(please state instructor's name, number of soloists and applicant's name)