

Office use only

.....
Competitor No 1* **First Name (please print)** **Surname**

.....
Number **Competitor No 1 Postal Address**

.....
Suburb **State** **Postcode**

..... (.....)
Competitor No 1* Email **Studio Phone** **Studio Name (please print)**

.....
Parents Name Competitor No 1*(please print) **Parents Signature** **Parents Mobile**

Competitor No 1* must be the same in each section on this entry form. All competitors ages as of 1st May.

Duo/Trio Ages: 12yrs/U or 13yrs/O **Sections:** Classical / Lyrical / Contemporary / Tap / Jazz / Hip Hop

Age / Section		First & Surname	D.O. B	\$10 p/p
	Competitor 1*			\$
	Competitor 2			
	Competitor 3			
	Competitor 1*			\$
	Competitor 2			
	Competitor 3			
	Competitor 1*			\$
	Competitor 2			
	Competitor 3			
	Competitor 1*			\$
	Competitor 2			
	Competitor 3			
	Competitor 1*			\$
	Competitor 2			
	Competitor 3			
	Competitor 1*			\$
	Competitor 2			
	Competitor 3			

Place 'X' in box if you **do not** give permission for photos/videos of your child/children to be used for promotional purpose.

Compulsory Administration Fee **\$ 10.00**
 Donation
Total Amount Payable

Postal Entries:
 St George Dance Eisteddfod
 PO Box 358
 Panania NSW 2213

Send completed Entry Forms & attach Cheque or Money Order made payable to-
 St George Dance Eisteddfod
Do not post CASH!

EFT Payment:
 Account Name: St George Dance Eisteddfod
 BSB: 062 458
 Account Number: 1019 4826

Email completed Entry Form(s)
with a Copy of bank remittance
 To: info@stgeorgedanceeisteddfod.com.au or post.
No 1 Competitors Name must be put in Receivers reference
 when making EFT payment,
 so we can **IDENTIFY YOUR PAYMENT.**