

Office use only

.....  
 Studio Name (please print)

.....  
 Postal Address

..... Suburb State Postcode

..... Email (.....) Studio Phone Mobile

**Complementary entry  
for 2 Teachers per studio**

..... Teachers Name (please print) Teachers Signature

Teacher 1 ..... Teacher 2 .....

**Large Groups:** minimum 11 competitors no maximum number of competitors, please advise number of competitors in each entry

**Ages:** 6yrs, 8yrs, 10yrs, 12yrs, 14yrs, Open Age. **Age as of 1st January, must be taken on the eldest performer NOT average age**

**Sections:** Classical Ballet, National or Demi Character, Jazz, Broadway Jazz, Lyrical, Contemporary,

Tap, Hip Hop, Song & Dance, Musical Theatre/Revue 12yrs/U + 13yrs/O

Age	Sections	Entry Fee \$30	Number of Competitors
12yrs/U	Musical Theatre / Revue (Time Limit 10 mins)	\$	
13yrs/O	Musical Theatre / Revue (Time Limit 10 mins)	\$	
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<b>Administration Fee</b>		<b>\$ 20.00</b>	Please complete the number of competitors in each group so that we can use this information for dressing room allocation and prize ribbons.
Donation		\$	
<b>TOTAL AMOUNT PAYABLE</b>		<b>\$</b>	

**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](mailto:info@stgeorgedanceeisteddfod.com.au) or post.  
**Studio Name must be put in Receivers reference** when making EFT payment, so we can **IDENTIFY YOUR PAYMENT.**