



ENTRY FORM

1. Name of organization: _____ ()
PHONE

2. Address: _____
STREET CITY ZIP

3. Manager: _____ ()
NAME PHONE

4. Choreographer: _____ ()
NAME PHONE

5. E-Mail: _____ **Required** New Chor: Y / N

6. Division: **a) Minor** **b) Junior** **c) Senior** **d) Adult** (circle only one)
Age => (06 to 10) (11 to 15) (16 to 29) (30 to 30+)

7. Category: **a) Raas** **b) Garba** **c) Folk Dance** (circle only one)

8. Title of Song _____

9. Name of participants _____ Length of the ENTRY _____ Minutes

NAME	BIRTH DATE	GENDER

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10. Brief description of song: _____

11. Entry form and entry fee of \$ 100.00 _____ must be received on or before May 15, 2018
DATE

Make check payable to: India Performing Arts Center Inc
HOST ORGANIZATION

Our group participants and I have read the rules and regulations of this competition and we understand and agree to abide by them and help the host organization for a smoother program.

Signature: _____
PRESIDENT / GROUP MANAGER OR CHOREOGRAPHER DATE