

REGISTRATION FORM SOLOIST & PAS DES DEUX 2015

(to be clearly filled in capital letters for each choreography to be presented)

· **NAME OF SCHOOL or Association or Other** _____

· **DATA**

Street: _____ City: _____ Postal Code: _____

Province: _____ Tel: _____

VAT.: _____ E-MAIL: _____

· **TITLE OF CHOREOGRAPHY** _____

· **AUTHOR OF CHOREOGRAPHY** _____

· **MUSIC** _____ **DURATION OF CHOREOGRAPHY** _____

· **SECTION (x):**

28 February - Modern, Jazz, Contemporary

01 March – Neo Classic and Ballet

JUVANILE I

JUVANILE II

JUNIOR

SENIOR

(dancer/s)

1. **FIRST NAME** _____ **SURNAME** _____

Gender **M** **F** D.O.B. _____ Place of Birth: _____

2. **FIRST NAME** _____ **SURNAME** _____

Gender **M** **F** D.O.B. _____ Place of Birth: _____

· **NAME OF RESPONSIBLE** _____

· **Telephone contact** _____

E-MAIL _____
