



## ENTRY FORM

Name of Artist: \_\_\_\_\_

Phone No (s): \_\_\_\_\_

NRC No. 

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 Email: \_\_\_\_\_

Address: \_\_\_\_\_

Title of Work(s): \_\_\_\_\_

PLEASE TICK (✓) THE CATEGORY

Community Theatre	<input type="checkbox"/>
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Music	<input type="checkbox"/>
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Creative Writing	<input type="checkbox"/>
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Stage Theatre	<input type="checkbox"/>
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Comedy	<input type="checkbox"/>
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Traditional Music and Dance	<input type="checkbox"/>
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Media Arts	<input type="checkbox"/>
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Visual Arts	<input type="checkbox"/>
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Name of the Award: \_\_\_\_\_

*Refer to the Call for Entry*

I \_\_\_\_\_ hereby declare the works submitted  
*write your full name above*

are to the best of my knowledge my original works and I am the copyright holder and  
I have permission to use the works.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date