

In association with



# Application form

## Candidate evaluation

|  |  |
| --- | --- |
| NAME OF APPLICANT / GROUP |  |
| NAME OF GURU |  |
| CONTACT PERSON |  |
| ADDRESS |  |
| TELEPHONE/MOBILE |  |
| E-MAIL |  |
| TITLE OF PERFORMANCE |  |
| LANGUAGE |  |
| CONCEIVED BY |  |
| CHOREOGRAPHED BY |  |
| NUMBER OF PARTICIPANTS |  |
| MALES(AGE) |  |
| FEMALES(AGE) |  |
| KIND OF PERFORMANCE GROUP/SOLO/TRIO |  |
| DURATION OF PERFORMANCE |  |

We hereby declare our interest in participating in the Festival held at Kerala, by Samudra Arts International . We have read and understood the Rules and Regulations for participation.

## Signature with Date:

FOR OFFICE USE ONLY

 Non- refundable Registration Fees to be paid by each participant INR. 500/-( Indian Rupees Five Hundred pnly)

PAID BY :…………………………………………………………………………………..DATE………………………………………….

 TREASURER/ SECRETARY SD/-