

WEST GIPPSLAND MUSIC & DRAMA EISTEDDFOD INC.

PO Box 64, Warragul 3820

2010 ENTRY FORM

Notes to Teachers and Entrants:

1. Please read the 2010 RULES AND CONDITIONS in the Schedule carefully, and **sign the declaration below.**
2. Groups please complete entry on back including entrants' names and dates of birth.
3. **Payment must accompany this form.** Cheques and money orders are to be made payable to: WEST GIPPSLAND MUSIC & DRAMA EISTEDDFOD INC. Do not send cash in the mail.
4. ENTRIES CLOSE: FRIDAY 11TH JUNE, 2010. NO LATE ENTRIES WILL BE ACCEPTED.
5. IF MORE THAN ONE DIVISION IS BEING ENTERED BY THE SAME ENTRANT, eg. Vocal & Guitar, **A SEPARATE ENTRY FORM MUST BE USED FOR EACH DIVISION.**
6. This entry form may be photocopied only on size A4 or downloaded from our website: www.wge.org.au
Please retain a copy for your records.
7. Teachers may send entry forms for several students with one cheque to cover all.
8. TIME LIMITS AS SPECIFIED WILL BE ADHERED TO STRICTLY.

PLEASE USE BLOCK LETTERS

SURNAME..... GIVEN NAME

ADDRESS.....POSTCODE.....

PHONE EMAIL.....

DATE OF BIRTH...../...../..... AGE AS AT 30TH JUNE 2010Years.....Months

MUSIC/DRAMA TEACHER.....PHONE.....

ADDRESS.....POSTCODE.....

Section No.	Name of Section	Age Group	Entry Fee	Office Use
<div style="border: 1px solid black; padding: 5px;"> <p>If you would like to become a member of the 'Friends of the Eisteddfod' please enclose the <u>Annual</u> contribution of \$15.00. <i>Please add name and mailing address here for receipt.</i></p> </div>		Program <i>Includes postage</i>	8.00	
		'Friends of the Eisteddfod'	15.00	
		TOTAL PAYMENT		

Vocal Accompanist Required
(Sections 7.00 - 7.22) Yes No

DECLARATION BY APPLICANT:

I have read and agree to be bound by the West Gippsland Music & Drama Eisteddfod Inc. 2010 Rules and Conditions, Special Rules and Copyright Rules as detailed in the 2010 Schedule of Events.

NOTE: Entrants participate in the Eisteddfod at their own risk.

SIGNED..... PRINT NAME:.....
Parent/Guardian to sign if entrant is under 18 years of age.

DATE..... (See over)

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All entrants to supply own music stands.

To be completed for duets, duologues, trios and all ensembles up to ten members.
Please list details of all additional entrants.

Section No.	Full Name	Date of Birth	Town

Preferred Group Name (if 3 or more members) _____
(Required at time of entry for inclusion in program)

For groups of 10 or more, give approximate indication of member numbers.
Please list any special requirements.

