



ENTRY FORM

Name of Artist:

Phone Number:

E-mail Address:

Address:

Title of Work(s):

Please Tick (✓) the Category

Community Theatre	<input type="checkbox"/>	Music	<input type="checkbox"/>	Visual Arts	<input type="checkbox"/>
Creative Writing	<input type="checkbox"/>	Fashion	<input type="checkbox"/>	Stage Theatre	<input type="checkbox"/>
Comedy	<input type="checkbox"/>	Media Arts	<input type="checkbox"/>	Traditional Music & Dance	<input type="checkbox"/>

Name of the Award:

Refer to the Call for Entry

I *Write Your Full Name Above* hereby declare the works submitted 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:



Ministry of Youth,
Sport & Arts.



"Putting Value on the Arts"