DEVIZES EISTEDDFOD – DANCE SECTION

SATURDAY & SUNDAY 21st & 22nd NOVEMBER 2020

Please use a separate entry form for each solo performer.

Complete and send to: Kathy Goodspeed, 69, Masefield Rd., Warminster BA12 8HU

Tel: 01985 216825 <u>kathygoodspeed@hotmail.co.uk</u>

There is no closing date for dance; entries are taken on a first come, first served, basis.

Details of classes, entry forms and online entry can be found on the website: www.devizes-eisteddfod.org.uk PLEASE COMPLETE EACH SECTION, USING BLOCK CAPITALS, AND TICK THE APPROPRIATE LINES

Performer's Name		Age at 31 Aug 2020	Special Needs	?		
Classes F	ees: Solos £5 (7 years and	under £4.50), Due	ets £7, Trios	and Quartets	£9, Groups £	12.
Class Number	Partner(s) or Group, if applicable (and approx no. in group)		n group)	Age of oldest at 31 Aug 2020		Fees
Programmes	Programmes will be available at the competition.			Number of Programmes :		
	But if you want one or more	•	ov	(£4.50 each inc p&p)		
				TOTAL TO BE PAID		
I declare that	these performers are within the	e age limits stated for t	heir classes	(nleas	se tick)	
ŕ	Devizes Eisteddfod, Sort Comitting Entry (and to who				ner's name as th	e reference.
Name				Tel No		
Address					Post Code	
Email				← important	ant, please write clearly!	
Doclaration	s (please tick on the lines	holow) :				
	for any entrant under 18 (or vu	•	age) I give (or h	nave obtained)	the necessary co	nsents for the
performer to t					·	
	d agree to abide by the Rules a d understand the Eisteddfod Sa	_	-			
	ent for this personal data to be				 -	
1 a awa a that th					evizes Eisteddfod	
	ese performers may be photogostic and publicity (o		onotograpner a	na those photo	ograpns may be u	sed on the
	receive details of forthcoming		(optional)			
Signed			Countersign	ned		
(Where an en	try is made by a child under 18	the entry form must b	e countersigne	d by a parent/g	guardian/respons	ible adult.)