

Please send the application form by 10.03.2025

Biuro Festiwalu: Suwalski Ośrodek Kultury ul. Papieża Jana Pawła II 5 16-400 Suwałki
muszelkiwigier.pl

**APPLICATION FORM
INTERNATIONAL SONG AND DANCE COMPETITION
“MUSZELKI WIGIER 2025” (WIGRY SHELLS 2025)**

DANCE GROUPS

I. Information about the group

1. Group's name
2. Category
3. Institution entering the group for the Competition (address, phone number)
.....
4. Instructor's name
5. Address (email)
.....
6. Number of performers
7. Age of performers
8. Short information about the group
-
-
-

II. The programme

1. Title
2. Choreography
3. Music
4. Duration
5. Technical requirements

Instructor's signature

Applicant's signature and seal

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**APPLICATION FORM
INTERNATIONAL SONG AND DANCE COMPETITION
“MUSZELKI WIGIER 2025” (WIGRY SHELLS 2025)**

SINGERS

1. Name and surname of singer or name of the group.
.....
2. Birth year (in case of the group, please state the birth year of the oldest member).
3. Institution entering the group/soloist for the Competition (address, phone number, email)
-
4. Programme (title, authors).....
 - a) song
 -
 - b) song to be performed at Jury's request
 -
5. Type of accompaniment
6. Technical requirements
7. Short information about the singer/group.....
.....
-
8. Name and surname of the instructor.....
.....
9. Group consist of..... girls and boys
10. Enclosed demo CD/MK - description
-
-

Instructor's signature

Applicant's signature and seal

Accommodation booking

Accommodation for people:

..... girls boys

..... women men driver(s),

07.05/08.05.25 08.05/09.05.25 09.05/10.05.25
10.05/11.05.2025

Circle and complete if applies

meals:

07.05.2025r. late dinner

08.05.2025r. breakfast late dinner.....

09.05.2025r. breakfast late dinner.....

10.05.2025r. breakfastlate dinner

11.05.2025r. breakfast

We would like to participate in dance workshop

.....
.....
.....
.....

(please state instructor's name, number of dancers and applicant's name)

Complete if interested in the abovementioned offers

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..... girls boys

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We would like to participate in singing workshop

.....
.....
.....
.....

(please state instructor's name, number of singers and applicant's name)

Complete if interested in the abovementioned offers