

Pacific International Ballet Competition 2019

Application form

Date of your application :

(Date / Month / Year)

参加者 Applicant info	NAME	First name	Middle name	Male	Female	
				<input type="checkbox"/>	<input type="checkbox"/>	
		Last name			Height	cm
	Contact address	Post code:				
	Tel		FAX			
	E-mail 1					
	E-mail 2					
	Date of birth		Age	on the 26 Aug. 2019		

本選演目 About your piece	<input type="checkbox"/> Junior I (age 9-12) <input type="checkbox"/> Junior II (age 13-15) <input type="checkbox"/> Senior I (age 16-18) <input type="checkbox"/> Senior II (19-30)			
	Length of your variation (No longer 2min 30sec!)		Name of your variation	
	min		sec	
	<input type="checkbox"/> Stage right <input type="checkbox"/> Stage left (From audience side)		If you checked " <input type="checkbox"/> CUE " please let us know the details	
	<input type="checkbox"/> Music first			
	<input type="checkbox"/> Music after placement <input type="checkbox"/> CUE			

W S	Workshop on 25 Aug	<input type="checkbox"/> Ballet <input type="checkbox"/> Contemporary repertoire (18~19:30 Junior II and over) <input type="checkbox"/> not attend
		* Only who wishes, workshop is out of the judgement !!

希望 Request	If you wish to study abroad, which countries would you like to go?
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所属 Your Ballet School	Name of your teacher	First name	Middle name	Last name	Male	Female
				<input type="checkbox"/>	<input type="checkbox"/>	
	Name of your school					
	Address of your school	Post code:				
	Tel		FAX			
	E-mail					

注文 Order	Do you wish to buy DVD or photo of your appearance on stage? <input type="checkbox"/> Yes <input type="checkbox"/> No
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- Please send this application by e-mail on PDF format.
- Each applicant has to fill this application.
- After receiving your application, we will send you the invoice.
- **We cannot give you a refund !!**