**18TH INTERNATIONAL GYMNASTICS AND DANCE FESTIVAL "GIM-SHOW 2024"**

**May 18, 2024**

**GYMNASTICS/DANCE COMPETITION REGISTRATION FORM\***

 (MUST BE FILLED OUT IN CAPITAL LETTERS)

1. NAME AND ADDRESS OF THE DELEGATING INSTITUTION:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. PHONE NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. INSTRUCTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ T-SHIRT SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **AGE CATEGORY** | **NAME OF** **FORMATION/MINI FORMATION/DUET\*** | **NO. OF PARTICIPANTS** | **T-SHIRTS** |
| **SIZE** | **AMOUNT** |
| **UP TO 9 Y.O.** |  |  | **7-8 Y.O.** |  |
| **9-11 Y.O.** |  |
| **12-14 Y.O.** |  |
| **XS** |  |
| **S** |  |
| **10 -13 Y.O.** |  |  | **9-11 Y.O.** |  |
| **12-14 Y.O.** |  |
| **XS** |  |
| **S** |  |
| **M** |  |
| **L** |  |
|  **14 -25 Y.O.** |  |  | **XS** |  |
| **S** |  |
| **M** |  |
| **L** |  |
| **XL** |  |
| **XXL** |  |

**18TH INTERNATIONAL GYMNASTICS AND DANCE FESTIVAL "GIM-SHOW 2024"**

**May 18, 2024**

**GYMNASTICS/DANCE COMPETITION REGISTRATION FORM\*** (INFORMATION ABOUT THE PARTICIPANTS)
(MUST BE FILLED OUT IN CAPITAL LETTERS)

1. INSTITUTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. INSTRUCTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. NAME OF FORMATION/MINI FORMATION/DUET\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. AGE CATEGORY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARTICIPANTS:**

|  |  |  |  |
| --- | --- | --- | --- |
| **NO.** | **NAME AND SURNAME** | **YEAR OF BIRTH** | **PAYMENT OF ACREDITATION** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
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| 21. |  |  |  |
| 22. |  |  |  |
| 23. |  |  |  |
| 24. |  |  |  |

**INFORMATION REGARDING THE SONG USED IN THE PERFORMANCE:**

TITLE:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AUTHOR OF THE LYRICS:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MUSIC COMPOSER:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DURATION:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Registration forms together with the confirmation of accreditation payment for participation in the "Gim-Show 2024" Festival should be sent in electronic form by March 23, 2024.*

*Organizer’s office:*

*tel. +48 512 496 277, +48 58 698 88 18*

*e-mail address:* *gimshow@mdk.gdynia.pl*

*coordinator of the Festival: Anna Ziemann phone no. +48 609 456 398*

*I have been informed that the Administrator of my data is the Youth Community Center in Gdynia, and detailed information regarding the processing of my data is available in Annex No. 1 to the regulations, information regarding the processing of personal data.*

**Attention**! Participants who want to receive an invoice are asked to provide the invoice details immediately after payment to the address: gimshow@mdk.gdynia.pl

 ……………………………………… ………………………………………………….

**STAMP OF THE INSTITUTION LEGIBLE SIGNATURE OF THE APPLICANT**

(not necessary in case the applicant is an individual)

**\*delete as appropriate**