



APPLICATION TO PARTICIPATE 2010

International Youth Arts Festival 2nd – 11th July 2010

Company Name:	Company Contact:
Address:	Phone (Work):
	Phone (Mobile):
	Fax:
	E-mail:
Title of work:	Website:

Art Form (Please tick)	Theatre	Comedy	Dance	Music	Visual Art	Film	Other
Number of Performers							
Age of Performers							
Is your performance / work designed for a specific age range?							
Please write a 75 word summary of your performance / work (Attach separate sheet if necessary)							

Running Time:		Preferred Performance time:		Preferred Dates:	
Venue Choice (Please tick)	Large Auditorium	Studio	Small Pub Venue	Site Specific / Outdoor	Other

Technical Requirements (Attach separate sheet if necessary)	
Enclosed: (circle) Photos DVD/Video CD Script	Office use only Application No: Date Received: E-mail confirmation sent:
WE CAN RETURN THESE TO YOU IF YOU INCLUDE A SAE	

Please Return to: Aniela Zaba, Festival Director, C/O Arts Office, Guildhall 2, Kingston upon Thames, KT1 1EU by **31st January 2010**