*INDIA WAVES DANCE MUQABLA 2020* *India Waves Youth Community Project*

*SOLO Entry Form*

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SOLO (Circle One):  Age group JUNIOR (9 yrs- 13yrs) | | | OPEN (14 yrs & up) | | | | | Solo Talent SHOWCASE (Non competitive) for all ages | | | | |
| Contestant Name |  | | | |  | | | | | | | |
|  | First Name | | | | Last Name | | | | | | | |
| Date of Birth (mm/dd/yyyy)  BIRTH DATE NOT REQUIRED FOR OPEN (14 yrs & Up) | | | | | Gender: Male | | | | Female | | | |
| Phone: | | | | | Email (Required)  (In case of minors, include parents/guardian’s email) | | | | | | | |
| Choreographer’s Name | | | | | Choreographer Email | | | | | | | |
| Explain your roots to South Asian country: India, UK, Pakistan, Bangladesh, Fiji, Sri Lanka, Afghanistan etc. | | | | | | | | | | | | |
| School/College | | | | | | | | | | | | |
| *If participant is interested to join India Waves Youth Wing & IW Youth TV, email resume to* [*yw@indiawaves.com*](mailto:yw@indiawaves.com) *(Eligibility: 13yrs-16yrs)* | | | | | | | | | | | | |
| By submitting this form, the contestant and parent/guardian agree to represent the above group and agree to follow all the rules and regulations of INDIA WAVES DANCE MUQABLA and will abide by the organizers final decision. | | | | | | | | | | | | |
| Additional information required:   1. What Song are you performing on? (Song Title & Name of the Film/Private album) 2. Backstage access request *(Read FAQs online before completing this section*)  (Print name & email for Backstage request) | | | | | | | | | | | | |
| Non-refundable Processing Fee: SOLO $32 per person / Talent SHOWCASE $42 per person Entry Form & non refundable processing fees can be submitted via Email attachment  Entries & Tickets accepted on first come first served basis | | | | | | | | | | | | |
| Credit Card Authorization  By completing & submitting this form, the credit card holder authorizes India Waves to charge the credit card | | | | | | | | | | | | |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (credit card holder’s name), hereby authorize India Waves to charge my credit card for  non refundable processing Entry fee amount = $ \_\_\_\_\_\_\_\_\_\_\_\_ + \_\_\_\_\_\_\_\_Number of non refundable admission tickets = \_\_\_\_\_\_\_\_\_ valued $ \_\_\_\_\_\_\_\_each. Grand Total amount authorized to charge my credit card = $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | |
| Type of Card (circle one):  Visa/MasterCard/Discover | | Credit Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | CVC code \_\_\_\_\_\_\_\_\_\_\_  (last 3 digits on the back of card) | | |
| Credit Card Mailing Address | | | | City | | | | | State | | | Zip |
| Email (if different than above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Cardholder’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (No signature required if submitting via email attachment. You agree to authorize to charge your above credit card.) | | | | | | | | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

IWDM20