



APPLICATION FORM

10th International Children's Festival of Performing Arts, New Delhi, 2009

Name of the Group:

Nationality:

Address:

Tel:

Fax:

Mobile:

E – Mail:

Representative:

Number of Participants

Performers	:	Male	Female
Staff	:	Male	Female

Total:

Sort of Performance:

Title:

Playwright:

Director:

Theme and synopsis

Time for Performance: Min.

Application is required to be addressed to: **Festival Director**, International Children's Festival of Performing Arts,
C/O Ryan International School, Sector – C, Pocket – 8, Vasant Kunj, New Delhi – 110070 India
Telephone: +91 – 11 – 26122712, Fax: +91 – 11 – 26122714
E-mail ryanschool@gmail.com

Profile of the group:

List of Participants

Name	Age	Sex	Passport No