

“Our Polish Flowers 2024”

APPLICATION FORM

Artist

Full name..... Date of Birth..... Category*.....

OR

Band name..... no. members..... Category*

Repertoire

1. Name of song.....
2. Name of song.....

Type of accompaniment *

Link for recording *

.....
Signature of Legal Guardian or Person over 18 years of age.

STATEMENT/AGREEMENT**

name.....

full address.....

I agree for the purpose of advertisement to Zwiazek Polakow w Melbourne and Radio ZZZ and Radio SBS, to use my photos and videos from the concert for publishing. The organisers have the rights to publish any content on social media. I agree to no financial from the publishing of my performance on social media.

.....
Signature of legal guardian or person over 18 years of age .

*Category

Declamation/ Dance Vocal/ Instrumental/ Band

*Accompaniment

Yourself/ band organised by the NPK concert/ backing track/ or N/A

*link optional

*if you are over 18 years old please fill this form out alone, if not please let your legal guardian do so.