



## PERFORMER APPLICATION

### 1. Personal Details

Name:

Street Address:

City:

Phone Number (home):

Dance Company:

Director/Team Captain Name:

Postal Code:

Country:

Phone Number (mobile):

Email:

Age:

Date of Birth:

### 2. Next of Kin (in case of an emergency)

Next of Kin:

Relationship:

Phone Number:

### 3. Style of Dance

Salsa

Bachata

Kizomba

Other (please specify):

Group Name:

Group Description (please describe group type, number of members in performance, and any other relevant information):

If this is your first time applying to perform at the Winnipeg International Salsa Congress please send us a video of your routine to [winnipegintsalsacongress@gmail.com](mailto:winnipegintsalsacongress@gmail.com) along with this application for viewing and approval purposes. Please select one:

I have previously performed at WISC  I have never performed at WISC and will be emailing a video

Please select (2) options for which evening showcase(s) you would prefer to perform in:

Friday  Saturday  Sunday

### 5. Declaration

I confirm that the information provided in this application form is correct to the best of my knowledge. I acknowledge that I have read and agree to the relevant Terms of Reference and agree to be bound by all Winnipeg International Salsa Congress policies and procedures.

Signature:

Date: