

Diversity Open Mic

Application Form

Please make sure all boxes are completed appropriately.

Title of Act:	
First Name:	
Last Name:	
E-mail:	
Address/Post Code:	
Mobile Number:	
Date of Birth:	
I certify that I have read, understood and agreed to the terms and conditions of entry and registration <input type="checkbox"/>	
Fees: I hereby enclose £10 for administrative fee to confirm my audition. Additional donation is acceptable, please indicate _____ Total Fees: _____	
Signature:	
Return Application: Augustus Onabanjo 133 Spring Bank Hull, HU3 1BL info@besthope.org.uk	Office Use: Categories: under 19 19 & over Date Received Date Acknowledged: Others: