

INDAK-INDAK 2024 ENTRY FORM

NAME OF CONTINGENT		CONTINGENT CATEGORY	
		☐ OPEN CATEGORY ☐ DAVAO CITY SCHOOL BASED CATEGORY	
PROVINCE OF CONTINGENT		NUMBER OF CONTINGENT MEMBERS	
CONTINGENT MANAGER			
CONTINGENT MANAGER'S CONTACT NUMBER AND EMAIL ADDRESS			
CONTINGENT CHOREOGRAPHER			
CONTINGENT CHOREOGRAPHER'S CONTACT NUMBER AND EMAIL ADDRESS			

NAME OF MEMBERS	POSITION / FUNCTION	AGE

Please attach Performance Synopsis (in English and not more than 50 words)

[illegible]