



JIKA COMMUNITY ARTS FESTIVAL – JCAF

Application form

PLEASE MAKE SURE YOU FILL EVERY SECTION

SECTION A: CONTACT DETAILS

PRODUCING COMPANY NAME	
COMPANY REGISTRATION NUMBER	
POSTAL ADDRESS	
PHYSICAL ADDRESS	
DISTRICT	
FACEBOOK PAGE NAME	
EMAIL ADDRESS	
INSTAGRAM	
WHATS UP NO	
CELL NO	
CONTACT PERSON	

ALTERNATIVE CONTACT NAME	
CELL NO	

SECTION B: PRODUCTION DETAILS

PRODUCTION STATUS (TICK ONE)

SPONSORED ☐

PRIVATE COMPANY ☐

INDIVIDUAL ☐

NUMBER OF PEOPLE TRAVELLING

TYPE OF PRODUCTION (Tick ONLY ONE category per performance)

FILM	<input type="checkbox"/>	POETRY	<input type="checkbox"/>
THEATRE	<input type="checkbox"/>	TRADITIONAL DANCE	<input type="checkbox"/>
MUSICAL THEATRE	<input type="checkbox"/>	CONTEMPORARY DANCE	<input type="checkbox"/>
Other - Describe	<input type="text"/>		



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SECTION C: PRODUCTION INFORMATION

1. TITLE OF THE PRODUCTION	
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2. WRITER NAMES	
<i>BRIEF BACKGROUND:</i>	

3. DIRECTOR / CHOREOGRAPHER / POETS NAMES	
<i>BRIEF BACKGROUND:</i>	
:	

4. STAGE MANAGER NAMES	
<i>BRIEF BACKGROUND:</i>	

5. PRODUCTION SYNOPSIS



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PLEASE CIRCLE YOUR ANSWERS AND/OR WRITE NUMBER NEXT TO THE WORD

Production Duration	30 minutes	60 minutes	90 minutes	Other
Number of Performers	Females	Males	Adults	Youth
Number of Members		Age restrictions	PG13	VNL16

STAGING AND TECHNICAL NEEDS

NEEDS	YES	NO	DESCRIBE
Furniture			
Black Out			
Back Stage			
Sound			
Lighting			
Strobe			
Other			
Other			

FESTIVAL FEES

Account name	Jika Performing Arts College
Bank name	First National Bank
Account number	63066570326
Branch code	250655
Amount	R200
Reference (Production name)	

SECTION D: APPLICANTS SIGNATURE

Signature
ID number
Name of Signatory
Designation
Date
