



NAME OF GROUP/INDIVIDUAL: _____

DATE OF ESTABLISHMENT: _____

VILLAGE: _____ **PROVINCE:** _____

COMMUNITY: _____

NAME OF HEAD OF ORGANISATION: _____

CONTACT PERSON 1: _____

CONTACT PERSON 2: _____

PHONE NO: _____

E-MAIL: _____

FACEBOOK PAGE: _____

ARTS SPECIALITY:

- VISUAL ARTIST FLORAL ARTIST FASHION DESIGNER LITERARY
 TRADITIONAL DANCE (MEKE) CONTEMPORARY DANCE MUSIC BAND
 COMPOSER OTHER

REQUIREMENTS:

1 Passport Photo, Birth Certificate, Tin Number, \$10 fee (1year), Photos of Art work

SIGNATURE: _____ **DATE:** _____ **Receipt Number** _____

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