

## **INDIVIDUAL REGISTRATION FORM**

	Registration Number:		
1. PERSONAL INFORMATION			
SURNAME:	NAME:		
DATE OF DIDTH.			
DATE OF BIRTH:			
ID NO:			
REGION:	CONSTITUE	NCY:	
DOCTAL ADDRESS			
POSTAL ADDRESS:			
PHYSICAL ADDRESS:			
TELEPHONE: (H)	, ,		
CELLPHONE:			
CLLEFTIONE.			
EMAIL:			
Are you a person living with a disability?	Y N		
Are you a pensioner?	Y N		
Are you a learner and/or student?	Y N		
Are you employed?	Y N		
2. <b>ART INFORMATION</b>			
ARTIST/STAGE NAME:			
ART DISCIPLINE:			
# OF YEARS IN ART INDUSTRY?			

## 3. **REGISTRATION FEES**

An annual registration fee of N\$ 100 for individual artists is to be paid to the NACN.

Registration fees are waived for pensioners, learners and students and people living with disabilities. Please provide proof of your status from a credible institution.

How do you intend on paying the registration fee?

Cash	EFT	Bank deposit	Arts Council office
	ccurate and hones		m that the information that is
NAME:		SIGNAT	URE:
	DATE:.		