



National Carnival Committee

www.SKNCarnival.com



The E C Daniel Building , Cayon Street Basseterre
Tel: 869-466-0057 / 466-0058 Email: info@skncarnival.com

REGISTRATION FORM — CARNIVAL SONG COMPETITION

Personal Information:	
Complete Name Last: _____	M.I.: _____ First: _____
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Residential Address: _____	
Home #: _____	Work #: _____ Cell #: _____
Email Address: (Please write your email clearly as it will be used in sending you important communications)	

Song Information	
Name of the Song:	
Name of Song Writer:	Name of Song Producer:
Comments	

Having read and understand , Please sign below and submit this document (Registration Form) to the St. Kitts Nevis National Carnival Committee.

I also understand that to complete the Registration Process for this Competition, I must complete and return the Registration Form by the stipulated deadline.

As such, it will show that I have read and agree to comply with the rules and regulations of said Competition

Participant Signature: _____ Date (dd/mm/yy): _____

Date received by Office: _____ Office Personnel receiving Form: _____

Office Signature: _____ Comments: _____

