

**Registration CHOREOGRAPHY:**

**Group Responsible:**

First Name / Second Name: .....

Group Name: .....

**Members :**

First Name :

Second Name :

Signature :

|       |       |       |
|-------|-------|-------|
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| ..... | ..... | ..... |

Name of the SHOW : ..... (not obligatory)

Time duration SHOW : ..... MIN (obligatory)

Date, responsible signature :

Date Signature Growing Culture :

(RESERVED FOR THE EVENT RESPONSIBLES)

The association Growing Culture asbl ..... received the sum of ..... for the registration to the GC BATTLES 2015 –LUX URBAN DANCE FESTIVAL from Miss / Mrs / Mr / Ms .....

DATE : .....

Signature Group Responsible:

Signature GC :

*Growing Culture a.s.b.l.F8347Siege: 127 rue Emile Mayrisch L-3855 Schiffflange*  
BANK INFORMATIONS BCEE No: IBAN LU12 0019 4255 6233 3000



**GROWING CULTURE**

**Registration Battle Breakdance 3vs3:**

1) First Name / Second Name: .....

Artist Name: .....

2) First Name / Second Name .....

Artist Name: .....

3) First Name / Second Name: .....

Artist Name: .....

Date, responsible signature :

Date, Signature Growing Culture :

**Registration Battle Dance 2vs2:**

1) First Name / Second Name: .....

Artist Name: .....

2) First Name / Second Name .....

Artist Name: .....

Date, responsible signature :

Date, Signature Growing Culture :

(RESERVED FOR THE EVENT RESPONSIBLES)

The association Growing Culture asbl ..... received the  
sum of ..... for the registration to the GC BATTLES 2015 –LUX URBAN DANCE FESTIVAL  
from Miss / Mrs / Mr / Ms .....

Date, Signature Group Responsible : DATE : .....  
Date Signature Growing Culture :

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**GROWING CULTURE**