

INDIVIDUAL REGISTRATION FORM

IMPORTANT GUIDELINES

- I. Please fill all the columns with **BLUE** permanent ink in **Capital Letters** only.
- II. The participation fee is **PKR. 1,500/- per participant**.
Note: An individual can submit a maximum of 2 artworks; both artworks will follow a **separate entry fee** and each artwork should have a separate artwork submission form attached at the back of the artwork.

For all cities in Pakistan, the fee can be submitted in the following ways.

1. Direct Online Transfer/ Bank Deposit/ in the name of **'Discovering New Artists'**.

Bank Details		Bank Details	
a.	Bank Name: Bank Alfalah Limited	b.	Bank Name: Faysal Bank Limited
	Account Title: Discovering New Artists		Account Title: Discovering New Artists
	IBAN # PK82ALFH0146001006788202		IBAN # PK14FAYS3152787000002194

Note: IBFT receipt should be delivered along with the artwork submission.

- III. The registration fee once paid is non-refundable and non-transferable.
- IV. The registration forms complete in all respect should be sent to the following Postal Address:

**ATTN: MS. SIDRA ALI (DIRECTOR PROGRAMMES)
DISCOVERING NEW ARTISTS
50-E, SUI GAS SOCIETY (NEAR DHA PHASE-V), LAHORE, PAKISTAN
TEL: 0322-4102159, 0335-4142241**

- V. All particulars in the registration form must be filled as illustrated below. Variation from the format can result in the rejection of registration.

For any further assistance, you can contact **DISCOVERING NEW ARTISTS** office by e-mail at info@discoveringnewartists.org or by phone at **0322-4102159, 0335-4142241**



DISCOVERING NEW ARTISTS

DETAILS – FILL IN CAPITAL LETTERS AND USE BLUE INK

INDIVIDUAL ID #:

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 (For Office Use ONLY)

PROJECT:

Art for Change - AFC	
International Emerging Artists Challenge - IEAC	

ARTIST’S DETAILS (Field with * mark is all mandatory)

ARTIST’S FULL NAME:* _____
 AGE:* _____
 CLASS:* _____
 INSTITUTION NAME:* (if applicable) _____
 BRANCH:* (if applicable) _____

PARENT/GUARDIAN DETAILS (for participants under 18):

PARENT/GUARDIAN NAME:* _____
 MOBILE:* _____
 EMAIL* _____
 ADDRESS:* _____

 CITY & COUNTRY:* _____

REGISTRATION & SUBMISSION FEE ACKNOWLEDGEMENT

I acknowledge/ accept that:

1. I have ensured that my/ my child’s name, parent/guardian name and the age are correct and thereby Discovering New Artists shall not be responsible if there’s any change in the name of information is requested after registration.
2. I confirm that the proof of payment for the submission has been attached/enclosed with this form and I agree that without the payment proof, Discovering New Artists has the rights to disqualify all the submissions;

INSTRUMENT NO: _____ **DATED:** _____

AMOUNT (in figures) **PKR:** _____ **TOTAL # OF Participant:** _____

**STAPLE HERE YOUR
 BANK DRAFT/PAY ORDER/ DEPOSIT SLIP/IBFT SLIP/CROSS-CHEQUE**

SIGNATURES
PARENT/GUARDIAN