

2024 School's Intellectual National Carnival ChutneySoca
Monarch Competition of Trinidad & Tobago

REGISTRATION FORM – PRIMARY SCHOOLS

NAME OF SCHOOL _____
(BLOCK LETTERS)

SCHOOL ADDRESS: _____

NAME OF STUDENT: _____

DATE OF BIRTH: _____

PHONE: _____ CONTACT# _____

HOME ADDRESS: _____

NAME OF SONG: _____

NAME OF COMPOSER / WRITER: _____

NAME OF PUBLISHER/PRODUCER: _____

DECLARATION:

I hereby state that the above information is correct and true to the best of my knowledge.

SIGNATURE
Parent/Teacher/Principal

DATE