

National Eisteddfod of South Africa®

Prospectus 2024



PART 14 Forms & Fees

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Celebrating 27 years of Youth Development in the Arts snce 1997

PART 14:

Registration, Entry Forms & Hard Copy Entry Fees 2025

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REGISTRATION & ENTRY FORMS FOR 2025

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IMPORTANT:

In order to prevent any confusion or misunderstanding, only the entry fees for HARD COPY entries have been used on the various entry forms in this document.

For more info about the cheaper ONLINE entry fees go to www.eisteddfod.co.za (Also refer to the complete details of entry fees below).

Hard copy entries refer to any entry completed on paper and is then hand delivered, faxed or e-mailed.

ENTRY FEES AND CLOSING DATES 2025

- In order to qualify for the fee as listed below, proof of payment should reflect a date before the **cut-off** date of the various entry types (e.g. Early Bird, etc.)
- The entry fees and closing date for entries for **2025** are as follows*:

2025	Individual	, Ensemble,	Small and I	Medium Size	ed Group	Entries	
	ONLINE E	NTRIES	en.	200. 3	4 50	HARDCOP'	Y
	Deadline: Early Bird Online entry (LIVELVIRTUAL) VIDEO ART)	Deadline: Standard Online entry LIVE VIRTUAL VIDEO ART	Deadline: Late Bird Online entry LIVE VIRTUAL VIDEO ART	Deadline: Lost Bird Online entry LIVE VIRTUAL VIDEO ART	FINAL Deadline Online entry VIDEO ART	Deadline: Hardcopy LIVE VIRTUAL VIDEO ART	FINAL Deadline Hardcopy VIDEO ART
	31 May	1 Aug	11 Aug	31 Aug	19 Ѕер	1 Aug	19 Ѕер
Art Entries	R 210	R 220	R 250	R 265	R 280	R 240	R 280
Video Entries	R 210	R 220	R 250	R 265	R 280	R 240	R 280
NEA Confidence Builder (1 participant)	R 120	R 130	R 155			R 155	
Individual entries	R 215	R 230	R 260	R 280		R 250	
(1 participant) Ensemble groups (2 – 5 participants)	R 295	R 310	R 350	R 375		R 330	
Small groups (6 - 10 participants)	R 370	R 390	R 440	R 470		R 410	
Medium sized groups (11 – 20 participants)	R 400	R 420	R 475	R 505		R 440	
121 38	Live & Vide	eo entries -	Large group	s (entry fee	as per nu	mber of par	ticipants)
21 – 30 participants	R 430	R 450	R 510	R 545		R 470	
31 – 40 participants	R 465	R 490	R 552	R 590		R 510	
41 – 50 participants	R 495	R 520	R 593	R 630		R 540	
51 – 60 participants	R 565	R 595	R 662	R 720		R 615	
61 – 80 participants	R 650	R 685	R 760	R 825		R 705	
81 - 100 participants	R 720	R 755	R 840	R 910		R 775	
101 – 200 participants	R 850	R 890	R 966	R 1075		R 910	
Full shows / productions	R 2250	R 2360	R 2590	R 2850		R 2380	

IMPORTANT: Unprepared items (e.g. Unprepared Reading, Improvisation, etc.) CANNOT be submitted as video entries.

IMPORTANT: Unprepared items (e.g. Unprepared Reading, Improvisation, etc.) CANNOT be submitted as video entries.

Submission of video and art entries:

Video and art entries will be adjudicated in three sessions. Video entries should be submitted on YouTube before any one of the following dates. A link to the YouTube video should be emailed to entry@eisteddfod.co.za. (See "Other Fees and Charges for 2024" in Part 1 for contact and banking details, as well as more info regarding per hand and courier delivery.)

□ Session 1: 01 Aug 2025 □ Session 2: 29 Aug 2025 □ Session 3: 19 Sep 2025

^{*} An extension of closing dates (if any) will be announced on the website and Facebook For more information about submitting video entries refer to Guidelines and requirements for video recorded entries in Part 1 of the Prospectus.

SUMMARY AND DESCRIPTION: HARD COPY ENTRY FORMS 2025

REGISTRATION FORM 2025

To be completed by all individuals / participating bodies.

Please note that you can also register ONLINE on the website: https://www.eisteddfod.co.za.

ENTRY FORM FOR NEA CONFIDENCE BUILDER 2025

To be used for Confidence Builder entries only.

ENTRY FORM FOR INDIVIDUAL ENTRIES 2025

To be used for single / multiple entries of ONE participant.

SPECIAL REQUEST FORM FOR INDIVIDUAL PARTICIPANTS 2025

To be used for single / multiple entries of ONE participant.

ENTRY FORM FOR MULTIPLE INDIVIDUAL ENTRIES WITH THE SAME ITEM **NUMBER**

To be used for a *single entry number* with up to 10 participants.

SMALL GROUP ENTRY FORM 2025

To be used for a group entry number with up to 10 participants.

LARGE GROUP ENTRY FORM 2025

To be used for a groups with 11 and more participants.

SPECIAL REQUEST FORMS 2025

To be completed for special requests to be considered during the scheduling of events.

Submission of entries on HARD COPY forms:

Completed copies of entry forms and the relevant proof of payment can be send by e-mail to entry@eisteddfod.co.za to reach the NEA Office before the closing date for entries.

IMPORTANT:

DO NOT SUBMIT ENTRIES ONLINE AND IN HARD COPY format. This will result in duplicate entries and duplicated cost! Proof of payment should be attached / included when submitting entries in hard copy format.

NATIONAL EISTEDDFOD OF SA® - REGISTRATION FORM 2025

Kindly PROVIDE / UPDATE the information below ONLINE or on HARD COPY. When necessary, kindly return this form ASAP by e-mail: register@eisteddfod.co.za.

PART 1: Details of school / institution

arreath ass of the information helpy. Place

NAME OF SCHOOL / INSTITUTE		TAILS: <i>(Pla</i>	ease prince	learry)					
CURRENTLY SELECTED REGION	•								
CURRENTLY SELECTED LOCAL	AREA								
		·							
POSTAL ADDRESS							CODE:		
E-mail ADDRESS (school)##									
PHYSICAL ADDRESS: STREET & NUMBER									
GPS Co-ordinates									
RESIDENTIAL AREA /TOWN									
TEL. NO.	F	AX NO.			TELEFA	X NO.			
Kindly indicate which of the follo	owina sch	ool calendars	apply to you	ur institution.	or learners fr	om vour s	studio (whe	ere applicable),
PUBLIC SCHOOL CALENDAR		3 TERM CAI	<u> </u>		RM CALENDAR		ОТН		
			L					1	
B. DETAILS OF CONTACT	T PERSO	N / REPRI	ESENTATI	VE:					
NAME OF REPRESENTATIVE									
TELEPHONE NUMBER (Work)					FAX NO. (Wo	rk)			
CONTACT NUMBER (After hours	5)	HOME:				CELL:			
E-MAIL ADDRESS of REPRESEN	TATIVE					When is Day:	your birtho	day? nth:	
					l	Duy.	110	IIGII.	
C. PARTICIPANT SLIPS	S :								
Important: Participation det As a courtesy gesture, partic									RD).
	cipant sii	ps will e-ill	aneu to reg	istereu par	ucipaully lis	LILULIOIIS	o / Illulviu	iuais Wileii	
explicitly selected below:					. 5				
explicitly selected below: Require e-mailed participant slip	os to the e	email address	provided ab	ove (See ##			Not	required	
	os to the e	email address	provided ab	ove (See ##			Not	required	
	os to the ϵ	email address	provided ab	ove (See ##			Not i	required	
Require e-mailed participant slip			<u> </u>	ove (See ##			Not :	required	
Require e-mailed participant slip			<u> </u>	ove (See ##			Not i	required	
PART 2: Hosting of e	eistedd	fod even	its	•)			·	
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Require e-mailed participant slip ART 2: Hosting of e Kindly indicate if you woul contact you with more info Cannot host any event Willing to host eisteddf	eistedd Id be able ormation in 2025 – iod events	fod even to host eis : will participa in 2025 – all	its steddfod ev ate at venues participants	ents at you s as provided welcome.	r school. (V)			·	
Require e-mailed participant slip ART 2: Hosting of e Kindly indicate if you woul contact you with more info Cannot host any event Willing to host eisteddf Willing to host eisteddf	eistedd Id be able ormation in 2025 – iod events	fod even to host eis: will participa in 2025 – all in 2025, but	its steddfod ev ate at venues participants only for lear	ents at you as provided welcome. rners from ou	r school. (V)) If yes,		office will	
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ART 2: Hosting of e Kindly indicate if you woul contact you with more info Cannot host any event Willing to host eisteddf Willing to host eisteddf	eistedd Id be able ormation in 2025 – iod events	fod even to host eis: will participa in 2025 – all in 2025, but	its steddfod ev ate at venues participants only for lear	ents at you as provided welcome. rners from ou	r school. (V)) If yes,	the NEA	office will	

PART 3

Kindly use the 2025 calendar below to indicate (*) UNAVAILABLE dates for PARTICIPATION or HOSTING (where applicable) within the proposed time frame. (Please discuss alternative dates with the NEA Office when necessary.) Please consider ALL dates that will NOT BE AVAILABLE due to other pre-planned school commitments, holidays, Religious or Holy Days. If needed, you are welcome to propose alternative dates for eisteddfod activities in your region.

Calendar for 2025: PLEASE MARK **UNAVAILABLE** DATES ONLY

July 2025	Mon 21	Tue 22 Term 4 Schools open Public Schools open	Wed 23	Thu 24	Fri 25	Sat 26
	Mon 28	Tue 29	Wed 30	Thu 31	Fri 1 Aug	Sat 2 Aug
August 2025	Mon 4	Tue 5	Wed 6	Thu 7	Fri 8 Term 3 Schools close	Sat 9 NATIONAL WOMENS DAY
	Mon 11	Tue 12	Wed 13	Thu 14	Fri 15	Sat 16
	Mon 18	Tue 19	Wed 20	Thu 21	Fri 22	Sat 23
	Mon 25	Tue 26	Wed 27	Thu 28	Fri 29	Sat 30
September 2025	Mon 1	Tue 2	Wed 3 Term 3 Schools open	Thu 4	Fri 5	Sat 6
	Mon 8	Tue 9	Wed 10	Thu 11	Fri 12	Sat 13
	Mon 15	Tue 16	Wed 17	Thu 18	Fri 19	Sat 20
	Mon 22	Tue 23	Wed 24 HERITAGE DAY	Thu 25	Fri 26 Term 4 Schools Close	Sat 27
	Mon 29	Tues 30	Wed 1 Oct	Thu 2 Oct	Fri 3 Oct Public Schools close	Sat 4 Oct
October 2025	Mon 6	Tue 7	Wed 8	Thu 9	Fri 10	Sat 11
	Mon 13 Public Schools opens	Tue 14 Term 4 Schools open	Wed 15	Thu 16 Term 3 Schools Half Term	Fri 17	Sat 18



NATIONAL EISTEDDFOD OF SOUTH AFRICA®

www.eisteddfod.co.za

NEA Confidence Builder

NEA CONFIDENCE BUILDER - ENTRY FORM

Complete all Sections

	INSTITUTIO	N OF BILL	ING							
4.1 W	/ho is responsit	ole for subn	nitting and pa	aying for this	s entry?	SCHOOL		STUDIO		PARENT
A.2. P	Please complete	and attach	n a Registra	tion form f	or this sch	nool/studio/p	parent to t	his entry fo	rm (Important: e	entries will not
	cepted without									
	Please provide t			-	:					
4.4 C	Contact number	for the res	ponsible pers	son:						
4.5 E	-mail address	of the respo	onsible perso	n:						
3.	PROFILE OF	PARTICIE	PANT							
NAME				SURNAME						
OMP	ULSORY INFOR	MATION: Er	ntries cannot	be processe	ed without	an ID Numb	er OR <i>Dat</i>	e of Birth		
		YEAR	MONTH	DAY	Female	Male	J. Git But	0 01 211 111		
	nber or of birth									
IAME	OE SCHOOL	(This refers to the	public / private school	the participant is atte	ending and could l	ne the same as in A2	2)			
IAIVIE	OF SCHOOL	(THIS TOTALS TO THE	public / private scrioor	the participant is att	shaling and could i	se the same as in 72	-)			
Schoo	l Grade			Langua	age of					
when app	plicable)				inication					
E-mail particip	of parent / pant									
Cell No	o. of parent (1)			Cell of or part	parent (2) icipant:		-			
	provide the	*	A Blind / Partia	ally sighted			Physically o	hallenged		
ısabılıt pplica	ty code where able		B Deaf/Hard of	f Hearing I	challenge D Learning		Not Applic	able		
.ppca.		1	,							
_	CATEGORY	Select	Speech	ence Builde and Dram	a items				Item Code: ☑	Entry fee
	Vocal Solo		Solo ver	rse speakinį	g (poetry)			9000	9000	
_	Instrumental	solo	Prose					9001	9001	
	Afrikaans		Poetry 6	ensemble				9002	9002	
	English		Prepare	ed reading				9003	9003	
	IsiNdebele									
-	IsiXhosa		-	nce Builde						
	IsiZulu		Vocal So	olo with pia	no accom	paniment		9004	9004	
Į.	c !:		Instrum	ental solo (acoustica	l instrumen	ts only	9005	9005	
	Sepedi								TOTAL:	
_	Sesotho								TOTAL.	
	· · · · · · · · · · · · · · · · · · ·		Instrum	ent: (e.g. p	iano, reco	rder,) wher	n applicab	le:	TOTAL.	
_	Sesotho		Instrum	ient: (e.g. p	iano, reco	rder,) wher	n applicab	le:	Grade:	
<u>.</u> -	Sesotho Setswana		Instrum	ent: (e.g. p	iano, reco	rder,) wher	n applicab	le:		
-	Sesotho Setswana SiSwati			copy EN				le:		
-	Sesotho Setswana SiSwati TshiVenda		HARD		TRY FEE	:: R 155.0	00			
accept	Sesotho Setswana SiSwati TshiVenda XiTsonga	s of the perf	HARD Closing otry refers	COPY EN J date for I to entry (will be allowe	TRY FEE hardcopy on pape	E: R 155.0 entries: 0 r submitt schedule ha	00 1 Aug 20 ed by fa s been fina	25 x or e-m alized and tha	Grade: ail. at entry fees are r	
accept he Rule	Sesotho Setswana SiSwati TshiVenda XiTsonga	es of the perf the Confiden	HARD Closing atry refers formance date ce Builder as o	COPY EN J date for I to entry (will be allowe	TRY FEE hardcopy on pape	E: R 155.0 entries: 0 r submitt schedule ha	00 1 Aug 20 ed by fa s been fina	25 x or e-m alized and tha	Grade:	
accept he Rule oss, the	Sesotho Setswana SiSwati TshiVenda XiTsonga Se note: Hare It that NO change les applicable to the	es of the perf the Confiden	HARD Closing or refers formance date ce Builder as of this festival.	COPY EN J date for I to entry (will be allowe	TRY FEE hardcopy on papel ed once the e Prospectu	E: R 155.0 entries: 0 r submitt schedule ha	00 1 Aug 20 ed by fa s been fina	25 x or e-m alized and tha	Grade: ail. at entry fees are r	

8 Registration and Entry Forms 2025



NATIONAL EISTEDDFOD OF SOUTH AFRICA®

www.eisteddfod.co.za

Use for Individual entries **ONLY**

Closing date for HARD COPY entries: 01 Aug 2025 **INDIVIDUAL ENTRIES 2025**

A. INSTITUTIO	N OF BILL	.ING						
A.1 Who is responsib	ble for subn	nitting and pa	aying	for thi	s entry?	SCHOOL	STUDIO	PARENT
A.2. Please complete		_					•	•
form (Important: entr		•			_	n form and	d proof of p	payment)
A.3 Please provide				person	1:			
A.4 Contact number	for the res	ponsible per	son:					
A.5 E-mail address	of the respo	onsible perso	n:					
B. PROFILE O	F PARTICIE	PANT						
NAME			S	URNAMI	≣			
COMPULSORY INFOR	MATION: E				ed withou	t a Date of	Birth	
Date of birth	YEAR	MONTH	DA	<u> </u>	Female	Male		
Date of Sitti								
NAME OF SCHOOL	(This refers to the	public / private schoo	I the part	icipant is att	ending.)			
School Grade (when applicable)				Langua	age of unication			
E-mail of parent / participant			<u> </u>			•		
Cell No. of parent (1)		-			parent (2) ticipant:			
*Kindly provide the disability code where	*	A Blind / Parti			C Intellect challeng	ed	-	y challenged
applicable		B Deaf/Hard o	f Hear	ring	D Learning	disabled	F Not Appl	icable
NB!! If you wish the NE							New to t	the NEA?
items, please complete regarding "special red						any notes	YES	NO
I accept the Rules and Regil accept that entry fees are responsibility to contact the date of events in my region that the NEA and its host vauthorize the NEA to use rewebsite.	ulations of the not refundable NEA if I have I accept the corners are inc	National Eistedo and that partici not received no decision of the N lemnified agains	Ifod Ac pation tification IEA ma st any	cademy a details w on of pen anageme loss, the	as outlined ir vill be publisi formance da ent about all eft of injury s	hed online . I Ites at least i I matters rega Sustained du	accept that in 7 days prior to arding this ev ring this festi	t remains my the starting rent. I accept val. I hereby
Name in Print			Signa	ture				

C. **DETAILS OF ENTRY / ENTRIES**

CATECORY

SECTION

	CA	ILGC	JIX I	N	IUMBI	ER			COI	DE	Trained by medication on continuate
Example	W	Α	0	2	2	0	5	6	0	9	E.g. "The Music Studio"
1.											
2.											
3.											
4.											
5.											
6.											
7											
8											
9											
10											

GRADE

IMPORTANT NOTICE: Participation details will be published ONLINE.

Individual participant slips will only be mailed on REQUEST to the e-mail address of the responsible school / studio / parent when requested on the Registration Form (see A.2 above). NB! Contact the NEA office if notification of performance dates has not been received at least 7 days prior to the starting date of events in your region.

More entries may be added on additional pages. Clearly provide your name on all additional pages.

HARDCOPY ENTRY FEE PER INDIVIDUAL ITEM:

Hardcopy live entry fee (until 01 Aug 2025): Video/Art Final Deadline for entries (19 Sep):

R 240 entries R 280

Number of TOTAL AMOUNT Entry fee DUE X R R

Name of the trainer / studio to be used as

"Trained by" institution on certificate

DETAILS OF PAYMENT: Please indicate with √ in appropriate blocks where applicable

	Ξ	Е	DATE OF ELECTRONIC TRANSFER	COMPULSORY: Provide name of participant as	Name of Participant
CASH	CHEQUE	F T		reference on the deposit slip. Email proof of payment to entry@eisteddfod.co.za	
Ent	ry fee d	ıе: R		Bank: ABSA	Account Name:
	iy icc u	uc. • •_			National Eisteddfod Academy
Bra	nch: Cle	earwate	er	Account Number: 404 747	7 8448
Cod	de: 632-0	005		Type: Current Account	
PO	STAL A	DDRE:	S: PO BOX 1288	, RANDBURG, 2125	





SPECIAL REQUEST FORM 2025 FOR INDIVIDUAL PARTICIPANTS AND GROUPS

For attention: Manager: Administration National Eisteddfod Academy	
Name of participant:	Date of Birth:
I / We kindly request the scheduling of events to accommod IF and WHEN possible : (Please note: Only activities who can be accommodated (e.g. participation in provincial / national)	nere the timeframe is fixed and available in advance
NATURE OF ACTIVITY (Provide a brief description of the activities and/or motivate your reque	ACTIVITY DATE(S)
(1 Tovide a brief description of the activities alloyof motivate your reque	(Block out the UNAVAILABLE dates on the calendar below.)

Calendar for 2025: BLOCK OUT DATES THAT ARE <u>NOT AVAILABLE</u>

July 2025	Mon 21	Tue 22	Wed 23	Thu 24	Fri 25	Sat 26
	Mon 28	Tue 29	Wed 30	Thu 31 Jul	Fri 1 Aug	Sat 2 Aug
August 2025	Mon 4	Tue 5	Wed 6	Thu 7	Fri 8	Sat 9
	Mon 11	Tue 12	Wed 13	Thu 14	Fri 15	Sat 16
	Mon 18	Tue 19	Wed 20	Thu 21	Fri 22	Sat 23
	Mon 25	Tue 26	Wed 27	Thu 28	Fri 29	Sat 30
September 2025	Mon 1	Tue 2	Wed 3	Thu 4	Fri 5	Sat 6
	Mon 8	Tue 9	Wed 10	Thu 11	Fri 12	Sat 13
	Mon 15	Tue 16	Wed 17	Thu 18	Fri 19	Sat 20
	Mon 22	Tue 23	Wed 24	Thu 25	Fri 26	Sat 27
October 2025	Mon 29 Sep	Tue 30 Sep	Wed 1	Thu 2	Fri 3	Sat 4
	Mon 6	Tue 7	Wed 8	Thu 09	Fri 10	Sat 11
	Mon 13	Tue 14	Wed 15	Thu 16	Fri 17	Sat 18

Please note: Incomplete forms cannot be processed.

IMPORTANT: SPECIAL REQUESTS SHOULD BE SUBMITTED WITH THE ENTRIES, BUT NOT LATER THAN

01 Aug 2025

Although the NEA will attempt to accommodate all reasonable requests, NO guarantee can be provided.





◀ 11 Registration and Entry Forms 2025

NATIONAL EISTEDDFOD OF SOUTH AFRICA®

www.eisteddfod.co.za

Closing date for HARD COPY entries: 01 Aug 2025

SINGLE ITEM NR.

MULTIPLE PARTICIPANTS

ENTRY FORM FOR MULTIPLE INDIVIDUAL ENTRIES WITH THE SAME ITEM NUMBER (For use by class teachers for participants with ONE entry only!)

		eve you completed and attached a copy of the lead without a registration form and proof of payr		orm to this	s entry form? (Importa i	nt : entri	es wil	I not be	Y	ES NO	Name or	school/studio:	
В.		CATEGORY SECTION NUMBER		DE CODE	Brief description of ite	m:							_
	Disability Code*	Names of Participants	Entry fee	Grade	Cell. No. (Parent)	Yea	r	Month	Date	Male	Female	Blind/Partially Sighted A Deaf/Hard of Hearing B	
1. 2. 3.			R 250 R 250 R 250									Intellectually challenged C Learning disabled D	
5. 5. 6. 7.			R 250 R 250 R 250									Physically challenged E Important: Provide the appropriate code next to the name of any participant	
7. 8. 9.			R 250 R 250 R 250 R 250									with a different ability C. DETAILS OF PAYMENT: with √ in appropriate blocks wh	 Please indicate
	CASH	ਰ F on the de	SORY: name of the sch	proof of p	io indicated above as ropayment to [011] 787 3			otal Entr	y fee	Bank: A	Clearwater	Account Name: National Eis Academy Account Number: 404 747 8 Type: Current Account	steddfod
	5	발 e-mail to	entry@eisteddf	fod.co.za			R				L ADDRES:	PO BOX 1288, RANDBURG	6, 2125
acc	ept that	ne Rules and Regulations of the National Eisteddfod Acader at the NEA and its host venues are indemnified against any I PRINT											



Name in Print

INSTITUTION OF BILLING

NATIONAL EISTEDDFOD OF SOUTH AFRICA™

www.eisteddfod.co.za

Small Group entries only 2-10 participants В.

C.

Trainer

Cell. No.

Area code & fax no.:

CATEGORY

DETAILS OF ENTRY:

Eisteddfod Academy

Type: Current

Account Number:

404 747 8448

Branch Code:

632-005

Contact details for the trainer responsible for this entry

SECTION NUMBER

Area code & tel. No:

GRADE CODE

ENTRY FEE

R

E-mail address:

SMALL GROUP ENTRY FORM FOR 2025 Complete all Sections – use ONE form per group

Closing date for HARD COPY entries: see website

Signature

◀ 12 Registration and Entry Forms 2025

	lease complete and attach a	•	and the second of the second									Ma	eans of payment	0 4 0 11	CHEQUE	
	mportant: entries will not be			rm and proof of p	payment)							IVIC	earis or payment	CASH	CHEQUE	E F
3 Ple	lease provide the name of the	e responsib	le person:													
4 Co	ontact number for the respon	sible perso	n:									Da	ate of payment		_//	2025
5 E-	-mail address of the responsi	ble person:										Ple	ease attach proof of	payment to thi	s entry	
uest v	mplete a Special Request form when scheduling your items. Do considered DETAILS OF PARTICIPAN (Please complete in clear p	NOT make	any notes in this regard	d on this entry for	m as it will		in an	ı ensen	nble or	10 pa	articipants	in a sma	all group:			
	(* ************************************															
ability	Names of participants	Grade	Cell. No. of Parent	Name of Scho	ool	Year		Month	Da	te	Male	Femal	le	DISABII	ITY CODE	*
Disability Code*	Names of participants	Grade	Cell. No. of Parent	Name of Scho	ool			Month 3 4		te 6	Male 7	Femal	e	DISABIL Blind/Partially		* A
Disability Code*	Names of participants	Grade	Cell. No. of Parent	Name of Scho	ool							Femal	e		Sighted	* A B
Disability	Names of participants	Grade	Cell. No. of Parent	Name of Scho	pol							Femal	e	Blind/Partially	Sighted Hearing	* A B C
Disability	Names of participants	Grade	Cell. No. of Parent	Name of Scho	pol							Female 8	e	Blind/Partially Deaf/Hard of	Sighted Hearing challenged	* A B C D
	Names of participants	Grade	Cell. No. of Parent	Name of Scho	pol							Femal	e	Blind/Partially Deaf/Hard of Intellectually	Sighted Hearing challenged bled	A B C
	Names of participants	Grade	Cell. No. of Parent	Name of Scho	pol							Female 8	le	Blind/Partially Deaf/Hard of Intellectually Learning disal Physically cha *Important: appropriate	Sighted Hearing challenged bled Illenged Provide th code next	A B C D E to
Disability Code*	Names of participants	Grade	Cell. No. of Parent	Name of Scho	pol							Female 8	e	Blind/Partially Deaf/Hard of Intellectually Learning disal Physically cha *Important:	Sighted Hearing challenged bled Illenged Provide the code next fany partic	A B C D E to

Date



NATIONAL EISTEDDFOD OF SOUTH AFRICA™

www.eisteddfod.co.za

MEDIUM / LARGE GROUP ENTRY FORM FOR 2024

(Use **one** form per group)

Closing date for HARD COPY entries: see website

MEDIUM & LARGE GROUP ENTRY More than 10 participants

. INS	TITUTIO	N OF BILLIN	IG									
.1 Who is r	responsi	ble for submit	ting and	paying	g for this er	ntry? SCH	OOL		STUDIO			PARENT
	•		_				/studio/	parent to	this entry forr	n (Impo	ortant:	entries will no
		a registration				nt)						
	•	the name of t			•							
4 Contact	t numbe	r for the respo	onsible p	erson:								
5 E-mail a	address	of the respon	sible per	son:								
COI	NTACT	DETAILS OF	THE IN	STITU	TION/INDI\	VIDUAL R	ESPO	NSIBLE F	OR THIS EN	TRY		
		P & GRADE	•									GUAGE OF
		on the certifica	ate								COM	MUNICATIO
– do not l		<i>nk!)</i> HER / TRAINI	ED									
NAIVIE OI	r IEACI	TEK / IKAIINI	EK									
MPORTAN	IT! HOW	F GROUP IT MANY PARTIC EXACT numbe	CIPANTS	IN THE	GROUP? (Entry cann	_	rocessed i	if this informat	tion is o	mitted)).
11	- 20	21 – 30	31 – 4	0	41 – 50	51 – 60	6	1 – 80	81 – 100	101 -	- 200	Full shows
CATEGO	DRY	SECTION NU	JIMBER	GRA	DE CODE		Brief description of item:					
		member of this		ve a A	Blind / Part	ially sighted		C Intellec	tually challenge	d	E Phy	sically challen
erent ability	/? (please	e tick appropria	te box)	В	Deaf/Hard o	of Hearing		D Learnin	ng disabled			Not Applicable
3!! If you wi	sh the NE	A to consider	any partic	ular red	quest when	scheduling	your iter	m, please c	complete and su	ubmit a	New	to the NEA?
ecial Requ	uest form	with your ent	ry. Any n	otes re	garding "s	pecial requ	ests" o	n this form	will be disreg	garded.	YES	NO
												111
		F PAYMENT		ndicat			blocks	where ap	plicable			ENTRY FE
How did		the entry fe				LSORY:	of the	CPOLIE	indicated in	. P		LINIKITE
ᄑ		*DATE OF PAYMENT Provide the name of the GROUP indicated in B as reference on the deposit slip. E-mail proof of payme						ont to				
CASH	EFT	/_	/2025			eisteddfod			nan proor or	payııı	ent to	R
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emains my re	sponsibility ne NEA ma	to contact the Ni nagement about	EA if I have all matters	not rec regardin	eived notificat g this event. I	ion of perform accept that ti	nance da he NEA a	ites at least 7 and its host ve	7 days prior to the	e starting nified aga	date of e inst any l	s are not refundab events in my regio loss, theft of injury nd website.
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NATIONAL EISTEDDFOD ACADEMY

PLEASE NOTE:
INCOMPLETE FORMS
CANNOT BE PROCESSED

SPECIAL REQUESTS FOR INSTITUTIONS 2025

For attention: Manager: Administration
National Eisteddfod Academy

Kindly schedule the learners of this institution to accommodate the activities as listed below during the festival period *IF and WHEN possible*:

DETAILS OF SCHOOL / INST	TITUTION / STUDIO : (Please print clearly)		
NAME OF SCHOOL / STUDIO			
POSTAL ADDRESS		CODE:	
AREA CODE & TELEPHONE NO.		School activities?	Image: Control of the
AREA CODE & FAX NO.		Grade activities?	Ø
NAME OF REPRESENTATIVE			
CONTACT NUMBER (AFTER HOURS)		CELL.	
E-mail ADDRESS			

Kindly provide the following information regarding the activities. Only activities where the timeframe is fixed and available in advance can be accommodated (e.g. participation in provincial / national events, external exams, etc.)

KINDLY LIST THE APPLICABLE GRADES	NATURE OF ACTIVITY (Provide a brief description of the activities)	ACTIVITY DATE(S)
		(Block out the UNAVAILABLE dates on the calendar below.)

Calendar for 2025: BLOCK OUT DATES THAT ARE NOT AVAILABLE

July 2025	Mon 21	Tue 22	Wed 23	Thu 24	Fri 25	Sat 26
	Mon 28	Tue 29	Wed 30	Thu 31 Jul	Fri 1 Aug	Sat 2 Aug
August 2025	Mon 4	Tue 5	Wed 6	Thu 7	Fri 8	Sat 9
	Mon 11	Tue 12	Wed 13	Thu 14	Fri 15	Sat 16
	Mon 18	Tue 19	Wed 20	Thu 21	Fri 22	Sat 23
	Mon 25	Tue 26	Wed 27	Thu 28	Fri 29	Sat 30
September 2025	Mon 1	Tue 2	Wed 3	Thu 4	Fri 5	Sat 6
	Mon 8	Tue 9	Wed 10	Thu 11	Fri 12	Sat 13
	Mon 15	Tue 16	Wed 17	Thu 18	Fri 19	Sat 20
	Mon 22	Tue 23	Wed 24	Thu 25	Fri 26	Sat 27
October 2025	Mon 29 Sep	Tue 30 Sep	Wed 1	Thu 2	Fri 3	Sat 4
	Mon 6	Tue 7	Wed 8	Thu 09	Fri 10	Sat 11
	Mon 13	Tue 14	Wed 15	Thu 16	Fri 17	Sat 18

IMPORTANT: SPECIAL REQUESTS SHOULD BE SUBMITTED <u>WITH</u> THE ENTRIES OR SHOULD REACH THE NEA OFFICE NOT LATER THAN 01 Aug 2025.

Although the NEA will attempt to accommodate all reasonable requests, NO guarantee can be provided.

