



## GAUTENG PROVINCE

SPORT, ARTS, CULTURE AND RECREATION  
REPUBLIC OF SOUTH AFRICA

### DJs REGISTRATION FORM

Name and Surname *(mark the relevant box with X)*

	Male	Female	LGBTQI
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ID Number			

Physical Address (Please attach proof of residence)


Contact Details

Primary Number	
Alternative Number	
Email	
Family Member Contact Number	

Current Occupation *(tick the relevant box)*

University Student	<input type="checkbox"/>	High School Student	<input type="checkbox"/>	Employed	<input type="checkbox"/>
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Details of the High School Attended

Name of High School you completed studies	
Where the School is located	
Province where the School is located	

If you are a tertiary student, kindly provide the name of tertiary institute you are currently studying at

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Do you know how to DJ? Yes  No  *(Tick the applicable one).*

If yes please provide details below

Which equipments can you play on	
When did you learn to play	
Did you get trained at a Professional DJ school? If yes, please mention the school and attach your certified certificates.	

## Contactable References

Name and Surname	Contact Details

\_\_\_\_\_  
Signature

\_\_\_\_\_  
DATE