



Polish National Alliance

2024/24

**Song and Dance / Choral Groups
Subsidy Form**

Ensemble / Group Name:			
Artistic Director Name:			
Mailing Address:			
Street Address:			
City:	State:	ZIP code:	

Please enter below the names and dates of birth of PNA members enrolled in your ensemble/group in 2024/25 school year.

Nr.	First and Last Name	Date of Birth	Nr.	First and Last Name	Date of Birth
1			26		
2			27		
3			28		
4			29		
5			30		
6			31		
7			32		
8			33		
9			34		
10			35		
11			36		
12			37		
13			38		
14			39		
15			40		
16			41		
17			42		
18			43		
19			44		
20			45		
21			46		
22			47		
23			48		
24			49		
25			50		

Please fill out this form and email it by September 30, 2024 to: fraternal@pna-znp.org