



**APPLICATION FORM  
NATIONAL LAVATORY COMPETITION  
HOUSEHOLD CATEGORY**

Family Name: \_\_\_\_\_

Name of Person Filling out form: \_\_\_\_\_

Village: \_\_\_\_\_

Home Number \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please use this box give us your precise residence location to make is easier for us to locate during inspection periods. Also, please note that a parent or an adult of 21years or over must be present during time of inspection. Your lavatory will not be inspected if there is no adult present during the time of visit.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Important:**

**This application form is to be completed by the owner of the household. The Teuila Festival Committee reserves the right to void and cancel your application if this notice is not adhered to.**