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| --- | --- | --- | --- | --- | --- | --- |
| **Name:** | | |  | | | |
| **Email Address:** | | |  | | | |
|  | | | | | | |
| **Phone Number:** | | | | |  | |
| **Do you identify as any of the following?** | | | | | | |
| **□** | | **Aboriginal or Torres Strait Islander** | | | | |
| **□** | | **Person with disability** | | | | |
| **□** | | **Polynesian or of Polynesian cultural heritage** | | | | |
|  | | | |  | | |
| **Please tell us about your design experience so far:** | | | | | | |
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| **Please tell us more about the collection or garments which you wish to showcase (inspiration, materials, etc)** | | | | | |
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