2016 CIOFF® Festival Report on the Groups

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| **Name of the Festival** | | | **XXVII. Mezinárodní folklorní festival Brno´16 (XXVII. IFF Brno´16)** | | | | | | | | | | | | | | | | | | | | | | | |
| **Address and City** | | | **Charbulova 231/3, 618 00 Brno** | | | | | | | | | | | | | |  | | | | | | | | | |
| **Country** | | | **Czech Republic** | | | | | | | | | | | | | **CIOFF® recognized International festival** | | | | | | | **YES**  **or NO** | | | |
| **Name of the Festival Director** | | | **Milan Zelinka** | | | | | | | | | | | | | | | **Date of recognition** | | | | | **3.2.1995** | | | |
| **Date of the Festival** | | |  | | | | | | | | | | | | | | |  | | | | | | | | |
|  |  | |  | | | Total num-ber of mem-bers | | Authentic/  Elaborate/  Stylized | How was the group invited? | | | |  | | | If the answer is “NO”, how did you invite the group from that country??  Please give a short answer  i.e. internet | | Contribution to  Travel Costs | | | Reimbursement for incidental Expenses | | | Level 5 to 1 (5 is excellent)  Please make your evaluation from 5 till 1 | | |
|  |  | |  | | |  | |  | Through National Section? | | Did you receive an Answer? | | Through your Network? | | |  | |  | | |  | | | Artistic level | Discipline of the Group | Cooperation group’s director |
| . | Name of the Group | | Country | | |  | | A  E  S | Yes | No | Yes | No | Yes | | No |  | | Yes | No | | Yes | No | |  |  |  |
| **1** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **2** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **3** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **4** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **5** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **6** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **7** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **8** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **9** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **10** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **11** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **12** |  | |  | | |  | |  |  |  |  |  |  | |  |  | |  |  | |  |  | |  |  |  |
| **Special (short) information** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Place** | |  | | **Date:** | | | **Signature** | | | | | | | | | | | | | | | | | | | |
| **Please send the completed report within 1 month after the festival to:** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Susanne Kramer**  **Festivals Commission** | | | | | 28a, Beschmontsbongert  L-7526 Mersch**/Luxembourg** | | | | | | | | | **Email:** [reports@cioff.org](mailto:reports@cioff.org) | | | | | | **Copy to your National Section** | | | | | | |