



YOUTH TALENT PRELIMINARY CONTEST ENTRY FORM

 Contact Name (for correspondence)

 Street Address

 City, State, Zip

 Cell Phone

 Alternate Phone

 Email Address

SUBMIT ENTRY FORM TO:

Mid-South Fair Youth Talent
c/o Debbie Branan
2584 Highway 51 South
Hernando, MS 38632

Email
KDJudge@aol.com

Entry not complete until payment form received

Please type or neatly print all information requested on the form below.

Name of Act: _____ Number of Performers in Act: _____

- | | | |
|--|---|---|
| <input type="checkbox"/> Vocal Solo | <input type="checkbox"/> Small Vocal Group (2-3) | <input type="checkbox"/> Large Vocal Group (4+) |
| <input type="checkbox"/> Dance Solo | <input type="checkbox"/> Small Dance Group (2-3) | <input type="checkbox"/> Large Dance Group (4+) |
| <input type="checkbox"/> Variety Solo | <input type="checkbox"/> Small Variety Group (2-3) | <input type="checkbox"/> Large Variety Group (4+) |
| <input type="checkbox"/> Instrumental Solo | <input type="checkbox"/> Band or Instrumental Group | |

Type of Musical Instrument (if applicable): _____

Type of Variety Act (if applicable): _____

Studio (if applicable): _____ Teacher: _____ Email: _____

Please list all contestants below (use additional pages if needed):

Full Name	DOB	Full Address	Parent's Name	Email Address

Has any member of this act been a professional entertainer?
 Yes No If yes, provide details: _____

I have read the rules governing the Youth Talent Contest and by my signature I/we agree to abide by them. I release to the Mid-South Fair any photos, films, and/or videos, which may be used for publicity or publication.

 Print Name of Parent/Guardian Signature of Parent/Guardian Date

The information above is certified by _____ (Local Chairman).