

Talent Show Audition Sheet

Name (First and Last) _____

Grade _____ Homeroom Teacher _____

Audition Date: **Monday, April 29** or **Tuesday, April 30** (Circle Day of choice)

Time _____ (Auditions will be from **3:50-5:00 p.m.**)

Please let me know if you are a bus rider and need to go earlier.

Talent: (Circle the one that best fits your performance)

Dance * Gymnastics * Poetry * Instrumental * Singing * Magic * Other

Talent Description: (Please give the judges an idea of what they will be seeing. Details help!)
Song Title (Check those Lyrics) Due to the number of performers, acts will need to be no longer than **2 minutes**.

List any other people performing with you:(Each member must submit their own signed audition form.)

I, _____ agree to perform the talent described above to the best ability in front of the judges at the tryouts and in the Talent Show. I understand that the judges will determine if my performance is appropriate for the event. A limited number of acts will be selected to perform from each category on the afternoon of the Talent Show.

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

Please return this form by Monday, April 22 for scheduling purposes. Each person in a group needs to return a form.

Audition Results will be announced on **Friday, May 3 during LH TV.**

Talent Show on **Friday, May 10 at 1:00 p.m.**