

Complete form and return to:
Arkansas State Fair – Senior Youth Talent
2600 Howard Street
Little Rock, AR 72206
Phone: 501-372-8341 Fax: 501-372-4197

2019 Arkansas Youth Talent Entry Form

Fair Being Represented: _____

Junior Division (Ages 14-17) _____ Senior Division (Ages 18-23) _____

Choose Southwest Region Northwest Region Northeast Region Southeast Region
One→ Monday 10/14 _____ Tuesday 10/15 _____ Wednesday 10/16 _____ Thursday 10/17 _____

Please type or print in ink. This form must be turned into the Arkansas State Fair office 5 days after Representing Fair is completed. **No entry forms will be accepted at the State Fair office after 5:00 pm on September 30, 2019.** All paperwork must be submitted by the Director of the Fair Talent Contest.

Vocal Solo _____ Vocal Group _____ Instrumental Solo _____ Dance Solo _____ Dance Group _____ Variety _____

Type of: Instrument(s) _____ Dance _____ Variety: _____

Name of Act (if Group): _____

Name of Song: _____

Contestant Name: _____ Age: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Shirt Size: S ___ M ___ L ___ XL ___ XXL _____

Contestant Signature: _____ Parent Signature: _____

Contestant Name: _____ Age: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Shirt Size: S ___ M ___ L ___ XL ___ XXL _____

Contestant Signature: _____ Parent Signature: _____

Contestant Name: _____ Age: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Shirt Size: S ___ M ___ L ___ XL ___ XXL _____

Contestant Signature: _____ Parent Signature: _____

**Please list additional contestants on back of sheet.

BY SIGNATURE ABOVE, CONTESTANTS AND PARENTS ACKNOWLEDGE THEY HAVE READ, UNDERSTAND AND AGREE TO COMPLY WITH THE RULES OF THIS CONTEST AND FURTHER CERTIFY THAT CONTESTANTS ARE NOT PAID PERFORMERS OR INSTRUCTORS OF THE ARTS.

Director's Signature: _____ Date: _____