# CLATSOP COUNTY TALENT CONTEST

Saturday, August 3, 2019 6:30 p.m.

## ENTRY FORM

*ONE WINNER FROM EACH DIVISION MAY COMPETE IN THE 2019 OREGON STATE FAIR STATEWIDE TALENT SEARCH FINALS!*

*Please submit completed form by 6:00 p.m. on Saturday, August 3rd.*

**Name of Individual/Group Performing:** _____

**Name of Person Submitting Entry:** _____

**Address:** _____ **City:** _____ **State:** _____ **Zip:** _____

**County of Residence:** REQUIRED **Home Phone:** _____

**Best Time to be Contacted:** _____ **Cell Phone:** _____

**Number of Performers:** _____ **List ALL Performers Below (use back if necessary):**

| Name (Last, First) | Age | Birth Date | Home/Cell Phone |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Division:** ___ **Children** (All members ages 5-9) ___ **Youth** (All members ages 10-17) ___ **Adult** (All members ages 18 and over)

___ **Amateur Status:** I certify that no person listed above belongs to a musicians' union, nor does any person's talent provide more than 50% of his/her income (if income exceeds $7,500). I/we understand I/we may be required to submit tax information.

___ **Not previous State Fair Winner:** I certify that no person listed above placed First at the State Fair Talent Search in 2017 or 2018.

**TALENT CATEGORY:** ___ Vocal ___ Dance ___ Instrumental ___ Comedy ___ Magic
___ Other _____ ___ Band (No more than 3 instruments. No drum sets.)

Briefly describe your act, including instruments, props, choreography, etc. (Performance may not exceed five minutes, with one minute allowed for set-up, if any. Please bring all equipment *and cords* required to play your music.)

_____

_____

Name of Piece to be Performed: _____

**Type of Accompaniment:** ___ Cassette Tape ___ CD ___ Piano ___ Other _____

**Equipment Needed:** ___ Wireless Handheld Mic (4 available) ___ Electric Piano ___ CD Player ___ Cassette Tape Player

I/we wish to enter the Clatsop County Talent Contest and agree to abide by the rules. I/we certify that all information provided is true and accurate.

_____ _____

Signature: (Parent or legal guardian must sign for minor) Date:

Return to: Hits 94.3 KRKZ, 927 Marine Dr. Astoria, Or 97103 or steph@meadowsbroadcasting.com - or - Clatsop County Fair & Expo, 92937 Walluski Loop, Astoria, OR 97103