



Audition Application Form

Applicants Name: _____

City of Residence _____

Date of Birth: _____ Age: _____ Sex(M/F): ____

Parent's/Guardian's Full Name: (if under age 18) _____

Parent's /Guardian's Home Tel: _____ Office: _____ Cell: _____

Parent's/Guardian's Email: _____

Address: _____ City : _____

State _____ Postal Code _____ Shirt Size _____

Select talent category (You can select more than one)

SINGING DANCING INSTRUMENTALS CREATIVE MINDS

Please include a brief description of your talent: _____

We also ask that you bring:

1. Your own music on CD (2 copies, no more than 2 min.), & any props needed for audition
2. 3 Passport size photos (current) of the candidate with their name printed on the back of each, for filing purposes (helping us to identify and remember the candidate)
3. Your own instrument to play (a piano will be provided)
4. Proof of age and residency (ie: copy of birth certificate, drivers license, name on a utility bill, etc. are acceptable forms of proof)

*****Deadline: Contact your local representative for application deadlines**

Note: Applicants selected for the "Duchesne County's got Talent" Competition are responsible for all expenses incurred relating to event and competition. Please read and be familiar with all rules and regulations pertaining to the competition before your audition.

Final Competition Event Date: Friday, August 7th @ 4:00pm @ DHS Auditorium

Program Hosted By the Duchesne County Fair

EMAIL THIS COMPLETED FORM TO YOUR AREA AUDITION REP:

(Duchesne area audition): kgrant@ubtanet.com	(Roosevelt area audition): jmonsens@dcsd.org
(Altamont area audition): jwrobb3334@yahoo.com	(Myton area audition): donnarichens@stratanet.com
(Tabiona area audition): tangee_lazenby@yahoo.com	
or tomirhoades@yahoo.com	

For official use only:

Application #: _____

Received on Date: _____