



2017 Capitol Got Talent Competition Entry Form



- Individual Act
- Group Act

Name (if group, please provide group name and members):

Birthdate(s): _____ Gender: _____

Contact person: _____

Email: _____ Music School /Teacher's name _____

SOLO ACTS

Talent Performing (please specify name and artist):

GROUP ACTS

Talent Performing (please specify name and artist):

Entry forms are due on July 31,2017. Audition is on August 5, 2017. Final compitation is on August 19,2017

Email: sacccf@gmail or call: 916-606-5288

By signing and submitting this form, I agree to and will adhere to "Talent Competition" Rules and Regulations and may be subject to disqualification if any rules are not abided by.

Parent/Guardian

Signature

Date

Talent Competition Rules and Regulations

1. Acts requiring more than **12 FEET** of ceiling height will not be allowed.
2. Acts will be allotted no more than **FIVE (5) MINUTES** to perform.
Acts will be **PENALIZED** if time is exceeded.
3. Participants may only perform **ONE** time during the show. Any participant who participates in more than one performance will disqualify **BOTH** acts.
4. **NO** profanity or vulgar lyrics in any vocal performance or dance music.
This is a family show!!!
5. Keep attire at a respectable and tasteful level.
6. **NO** pyrotechnics, open flames or any other dangerous additions.
7. Sound Technician, microphone(s) and piano will be provided. **YOU** must provide your own CD music, taped music, instruments, props, keyboard, etc., if needed.

NO EXCEPTIONS WILL BE MADE TO THESE RULES!

Rules are subject to change at the sole discretion of the Talent Competition organizers.

Request: _____ Numeber of Microphens _____ Number of Music Stands _____ Number of Chairs
Piano (Y/N), CD music (Y/N), Instrument Setup (Y/N), Props Setup (Y/N)

Photo Release Form for Minors (if under 18)

The **2017 Capitol Got Talent** has my permission to use my or my child's photograph publically to promote the event and organization. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature: _____ Date _____

Parent/Guardian's Name: _____

Child's Name: _____

Phone Number: _____

Photo Release Form for Adults

The **2017 Capitol Got Talent** has my permission to use my photograph publically to promote the event and organization. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Signature: _____ Date _____

Name: _____

Phone Number: _____