ENTRY FORM

CLEBURNE'S GOT TALENT
Springfest 2009
Registration deadline –April 4, 2009

Circle One: Individual Group Circle Age Group: 12 & Under 13-18 Over 18

Name of Contestant(s) / Age (s)

_____/_____ _____/_____

_____/_____ _____/_____

Name of Act or Song_____

Brief description of act: i.e. singing, dancing, clogging, etc. _____

_____

Circle One: CD None IMPORTANT: Mark your music clearly with your name and song to be played

Pick up your CD after the program.

Name of Contact Person_____

Address _____

City, State ,Zip _____

Phone: _____email_____

Liability: In consideration of my entry in the CGT, sponsored by the DCA, I, intending to legally bound, do hereby for my executors, assign, waive, release, and forever discharge any and all rights and claims for damages I may have, or which hereafter accrue to me, against CGT, talent committee members, and all talent sponsors or co-sponsors or their respective officers, agents, representative, or successors, for any and all damages which may b e sustained and suffered by me in connection with my association with, or participation in the Cleburne's Got Talent competition. All persons under 18 years of age must have the written consent of their parents or legal guardian to participate in this event. The parent/guardian hereby consents to the participation of the applicant (contestant) and waives and released all rights, claims, and damages as is more fully set forth above.

Print name of Contestant

_____

Signature of contestant Date

_____

Signature of parent or Guardian (if under 18)

MAIL ENTRY TO: *Cleburne's Got Talent*, P.O. Box 1595, Cleburne, Texas 76033