

**Willis Elementary Talent Show 2014**

**When:** May 22 (Dress Rehearsal/Students Only) (Evening Show/Open to All)  
May 23 (Morning Show/Students Only)

**Where:** Willis Elementary Cafeteria

**Time:** May 22, Dress Rehearsal TBA. 6:30 PM (Evening Show)  
May 23, 9:00 (School Show)

**Audition Dates:** Tryouts will be held on the morning of April 25th

**Rehearsals:** TBA During School Hours.

Due to the large number of Talent Show applications, all students who audition must have this form signed and returned by the morning of **April 25th** (No exceptions). Students must have their acts **completely learned by the try-out date of April 25th** (No exceptions). Any students who wish to sing **must obtain a Karaoke CD** at any music store or on iTunes. You may also bring \$2.00 to Mrs. Isaacs and she will download the song onto a CD for you. This must be done before the audition date of April 25th. All music must be clean/appropriate (both content and words). Mrs. Isaacs must approve all music if it is questionable. **The duration of the act must not exceed two minutes.** A student may perform in only **TWO** acts. If a student performs in **TWO** acts, one must be a duet or solo, and the other a group performance, and the student must turn in two separate permission slips. Students may wear any costume they wish, as long as it is tasteful and approved by Mrs. Isaacs. **ALL STUDENTS MUST COMPLY WITH THE RULES IN ORDER TO PARTICIPATE.**

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**Detach and keep top portion for your records**

**Name:** \_\_\_\_\_ **Teacher/GRD:** \_\_\_\_\_

- |  |                                       |                                       |
|--|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Dance             | <input type="checkbox"/> Singing      | <input type="checkbox"/> Comedy       |
| <input type="checkbox"/> Gymnastics        | <input type="checkbox"/> Rap          | <input type="checkbox"/> Skit/Acting  |
| <input type="checkbox"/> Jump Rope Routine | <input type="checkbox"/> Martial Arts | <input type="checkbox"/> Magic        |
| <input type="checkbox"/> Other _____       |                                       | <input type="checkbox"/> Instrumental |
|  |                                       | List Instrument: _____                |

**\*No lip-syncing will be allowed**

Song title or Music: **(Must be appropriate for elementary age children)**

**Group Act:**

List name and teacher of each person in the act. **Permission slips for all members of the group should be turned in together, stapled or paper clipped.**

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**Check what equipment you need:**

- |  |   |
|--|---|
| <input type="checkbox"/> CD player     | <input type="checkbox"/> Tumbling mats    |
| <input type="checkbox"/> Piano         | <input type="checkbox"/> Tables or chairs |
| <input type="checkbox"/> Microphone(s) | <input type="checkbox"/> Other: _____     |

**Parent Signature:** \_\_\_\_\_