



SEASON 7#



OFFICIAL ENTRY FORM

Auditions are open to all Kansas City Metro **YOUTH** ages 18 years old and younger

STAGE NAME or GROUP NAME _____#

NAME (Given name or main contact person if a group) _____

NAME OF PARENT OR LEGAL GUARDIAN (IF UNDER 18 YEARS OF AGE) _____

PHONE _____ CELL OR ALTERNATE PHONE _____

E-MAIL (**Please print clearly.** This will be the main form of contact) _____#

ADDRESS _____ CITY/STATE/ZIP _____

AGE _____ DATE OF BIRTH _____

BRIEFLY DESCRIBE YOUR ACT (singing, musician, dancing, acrobat, etc.) _____

IF THIS IS A GROUP, HOW MANY PEOPLE ARE IN THE GROUP? (LIMIT 10) _____

GROUPS ONLY:

WHAT IS THE AGE RANGE OF YOUR MEMBERS? (for example, 7-14 years old) _____

PLEASE LIST THE NAMES, PHONE NUMBERS AND E-MAIL ADDRESSES OF ALL GROUP MEMBERS, AND THEIR PARENT(S) OR LEGAL GUARDIAN (IF UNDER 18) ON THE BACK OF THIS FORM.

PLEASE NOTE: AN AUDITION DOES NOT GUARANTEE A PLACE IN THE FINAL SHOW, BUT IF SELECTED TO MOVE ON, THE ACT/NUMBER/ROUTINE YOU AUDITION WITH IS THE SAME ONE YOU WILL BE REQUIRED TO PERFORM AT THE FINAL SHOW. ALL MEMBERS OF A GROUP MUST BE PRESENT AT THE AUDITION.#

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COMPLETE THIS FORM AND MAIL/SUBMIT, WITH YOUR (non-refundable) **\$35 ENTRY FEE.** (Cash or check made payable to Lee's Summit CARES) **TO BE RECEIVED NO LATER THAN APRIL 14, 2017 TO: #**

LEE'S SUMMIT CARES
901 NE INDEPENDENCE AVENUE
LEE'S SUMMIT, MO 64086

DUE TO STRICT CONTEST RULES, LATE ENTRIES WILL NOT BE ACCEPTED AND WILL BE RETURNED IF RECEIVED AFTER APRIL 14TH.

AUDITIONS WILL BE HELD THE EVENING OF APRIL 20. CONTESTANTS WILL RECEIVE CONFIRMATION OF THEIR ENTRY RECEIPT EITHER BY E-MAIL OR PHONE. FURTHER AUDITION INFORMATION WILL BE PROVIDED AT THAT TIME.#

BEST OF LUCK!#