Oaklands Got Talent - 2019 Participation and Consent Form

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| --- | --- |
| Childs Name |  |
| Class |  |
| Parents Name |  |
| Telephone Number |  |
| Email Address\* |  |

**(\*required for communication of audition results)**

Solo Group (if group, please identify one point of contact; please note that each child participating in the group must complete an individual consent form signed by a parent or guardian in order to participate; please staple all of the group forms together, if possible):

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Description of the Act:

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Length of act (can be no longer than 2 minutes, approximately; this does not include set up time):

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Name of Act or song and artist/composer:

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For Group Acts Only, list other participants (Please include name and class):

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List of equipment to be used, if applicable:

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**PARENT CONSENT AGREEMENT**

Parents: By signing below, you are giving consent for your child to participate in the 2019 Oaklands got Talent Show

You also give permission to allow your child to be photographed and his / her name added to the programme and or information for purposes related to the show. You understand that the decision of the independent audition judges is unbiased, fair and final for selection of participants in the talent show.

Please tick here if you

Parent’s Name (Print):

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Parent’s Signature:

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| --- |
|  |

Date:

|  |
| --- |
|  |

**Please bring this form with to the audition .**

**Please direct all questions to the school PTA by emailing – OaklandsSchoolsPTA@gmail.com**