

# 2020 PERFORMING ARTS COUNTY APPLICATION FORM

Date of Competition: March 6, 2020 Time: 6:00 PM

**Return application to the Extension Office by Friday, February 28, 2019**

NAME OF ACT: \_\_\_\_\_

PERSON IN CHARGE OF ACT: \_\_\_\_\_

CLUB: \_\_\_\_\_ PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

TYPE OF ACT: Curtain non-  musical      Curtain  musical       Group

NUMBER OF PERFORMERS IN ACT: \_\_\_\_\_ **List names of ALL performers on back of application**

GIVE A BRIEF DESCRIPTION OF THE ACT (This may be used as your introduction.)

EQUIPMENT NEEDED: The following may be provided if you let us know in advance.

\_\_\_\_\_ Microphones (no more than 2)      \_\_\_\_\_ Number of chairs  
\_\_\_\_\_ Piano      \_\_\_\_\_ Number of tables

(Please note at the area contest these items will not be provided.)

POSITION ON THE PROGRAM: Check one of the following or give a specific position-i.e. 1st, 5th, 10th, etc.  
*We will do our best to accommodate you, though there are no guarantees.*

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Specific position: \_\_\_\_\_

PROPS: Give list of props you will bring and use during the act. Describe placement of props or equipment  
\*\*\*Bring volunteers to help get your scene ready.\*\*\*

MUSIC: Is music a part of your act? \_\_\_\_\_ What type of player is needed? \_\_\_\_\_

**Please note:** We will do our best to accommodate you, but encourage you to supply back-up player to ensure your music is available during your performance.

LEADERS / PARENT: View act before signing below. By approving this act you verify the performance is presentable to any age group.

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE: \_\_\_\_\_

(Signature of Adult Leader / Parent)

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Location for 2020 will be at Corydon Live! 220 Hurst Lane, Corydon IN 47112**