

2016 VRES Variety Show Act Participation Form
Return to Main Office by 1/15/16
Please turn in One Participation Form per Group

Names of all students in act: _____

Grade(s): _____

Name of Act: _____

Description of Act: _____

Will you need a piano? YES NO (please circle)

Does your act include music: YES NO (please circle)

Name of Music and Artist/Version (Clean): _____

Performance Time: _____ (Needs to be 2 1/2 minutes or less)

Performer will attend all practices? YES NO (please circle)

Performer has the following time conflicts: _____

Lead Parent Name / Cell Phone number: _____

Lead Parent E-mail: _____