

**Return by September 21, 2018**

2018

North Central Arkansas District Fair  
**Junior Youth Talent** Entry Form  
(Ages 10 to 15)

**Return Entry Form with Entry Fee to:**  
NCA District Fair Junior Youth Talent  
476 River Road  
Hardy, AR 72542  
Phone: 870-710-0709

**County Fair Being Represented:** \_\_\_\_\_

**Talent Categories** (See competition rules for descriptions and check one category) **Make sure of right Category**

Vocal Solo \_\_\_\_\_ Vocal Group \_\_\_\_\_ Instrumental Solo \_\_\_\_\_ Dance Solo \_\_\_\_\_ Dance Group \_\_\_\_\_ Variety \_\_\_\_\_

Description – Type of: Instrument(s) \_\_\_\_\_ Dance \_\_\_\_\_ Variety: \_\_\_\_\_

Name of Act (if Group) \_\_\_\_\_

Name of Song, Music, etc \_\_\_\_\_

**(List all contestants for groups)**

Contestant Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Age: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Contestant Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Contestant Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Age: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Contestant Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Contestant Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Age: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Contestant Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Contestant Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Age: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Contestant Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Contestant Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Age: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Contestant Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Contestant Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Age: \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Contestant Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

**County Director Signature** \_\_\_\_\_

\_\_\_\_\_  
Print Name of One Adult Responsible For Group

\_\_\_\_\_  
Print Contact Information – Cell Phone, Email Address

**BY SIGNATURE ABOVE, CONTESTANTS AND PARENTS ACKNOWLEDGE THEY HAVE READ, UNDERSTAND AND AGREE TO THE TALENT CONTEST RULES.**