



WAIHI'S GOT TALENT 2015

ENTRY FORM

Name: _____

Address: _____

Email: (please print clearly) _____

Home Phone: _____

Mobile: _____

School: _____

Year: _____

Age: _____

Date of Birth: _____

Type of Act: _____

Group Name (if applicable) _____

All Group Members must fill in an Entry Form.

Entrants must reside and or be attending a School in the Waihi, Waihi Beach area.

I acknowledge that the above details are true & correct.

Must be signed: (by Parent, Guardian or Teacher) _____

Date: _____

Judges decision will be final.

What type of device will be used for this act CD or I Pod: (No USB'S) _____

Would you like to attend a Master Class? Yes No

Completed Entry Forms to be returned to:

Waihi Beach RSA, PO Box 44, Waihi Beach 3642

Heats will be on Friday July 31st , August 7th & 14th and the Final night will be Friday 21st August. (Depending on numbers we may only need 2 nights for heats. Aug 7th & 14th)

ENTRIES CLOSE Friday 24th July 2015