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| Contact Information | SECTION 1 |
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This is an opportunity for individuals or groups, aged 10 to 16 years to display their artistic talents of singing, playing in a band, dancing, acting or any other performing art. The annual youth talent show takes place during City of St. John's, ChillFest celebrations.

| Contact | <u>Performer # 1</u> | <u>Performer # 2</u> | <u>Performer # 3</u> | <u>Parent/Guardian</u> |
|---------|----------------------|----------------------|----------------------|------------------------|
| Contact | _____ | _____ | _____ | _____ |
| Phone | _____ | _____ | _____ | _____ |
| Email | _____ | _____ | _____ | _____ |
| Age | _____ | _____ | _____ | _____ |

Additional Performers (list with age):

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| Performer(s) Talent | SECTION 2 |
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1. Describe the talent (i.e. Musical or dancing style, rock band, punk band, traditional improv., etc.)

2. If musical selection is chosen, please list the title, artist and song duration.

3. List any required equipment (chairs, table, microphones, keyboard, etc.)

Performer Biography

SECTION 3

Tell us about yourself or the group! Please provide us with interesting facts about yourself that you would like the emcee to announce to the audience. Information may include age, special training, school information or hobbies.

Performer Biography Example:

Reid is 11 years old and a Grade 6 student at St. Andrew’s Elementary
He is a member of his school drama club and plays the Saxophone in their school band.
Reid also attends the School of Dance doing Hip Hop and Street Funk classes.
He enjoys singing and dancing and one day hopes to become a professional entertainer!
This is Reid’s 3rd year performing in the Youth Talent Show.

Complete a Performer Biography (Please Print – Limit 50 to 75 words).

Feedback Information

SECTION 4

How did you hear about the Youth Talent Show?

Poster

Radio

Social Media

Website

Word of mouth (i.e., Friends, classmate, teacher, etc.)

Other _____

Privacy Notice

SECTION 5

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process this application. Questions about the collection and use of the information may be directed Manager of Community Programs & Services at 576-8020 or email recreation@stjohns.ca

Please send completed application to:

City of St. John’s – Recreation Division
P.O. Box 908, 10 New Gower Street
St. John’s, NL A1C 5M2

For further information:
Phone: 709-576-8630
Email: youth@stjohns.ca