

WISI (Wear-It Share-It) Day Talent Show/Tender Age Entry Form

Name of WISI Contestant: _____

Contestant#: _____

Address: _____

Telephone:(home)_____ (work)_____ (cell)_____

SOLO ACTS Talent

Performing: _____

Song Performing: _____

Unusual/interesting facts about performance: _____

GROUP ACTS Talent

Performing: _____

Song Performing: _____

Unusual/interesting facts about performance: _____

Names/ages of all WISI Contestants in group:

I WOULD LIKE TO ENTER THE TENDER AGE SEGMENT: (17 years & under)

Name: _____

Performing Act: _____

NOTE: Return entry form by the deadline date posted at www.hopeindarkness.org.

By signing and submitting this form, I agree to and will adhere to the Talent Show Rules and Regulations and may be subject to disqualification if any are not abided by.

Print Name

Signature/Date

For Office Use Only

Category: _____ Number: _____