Welcome to Dowell’s Got Talent!

FORMS:
- Application Form
  ONE PER ACT
- Parent Acknowledgement
  Form ONE PER STUDENT

AUDITIONS:
- Sept. 30 or Oct. 1 in E100
  4:00 to 7:00
- Signup outside E100
  for time slot
- Results posted Friday, Oct. 2

GUIDELINES FOR AUDITIONS:
- Your audition must be what you will perform in the talent show. Entertaining acts include: juggling, singing, dancing, playing an instrument, performing a monologue, magic, lip sync, gymnastics, etc.
- If your talent requires music, please bring music on a CD (not returned) Label with name & track number clearly.
- Only a CD player and a keyboard will be provided at auditions.
- If you have a band, at least one of the members must be a student at Dowell.
- Lyrics must be submitted with the application for approval.
- Mr. Wells reserve the right to stop your act at any time during the audition if he feels he has heard enough to evaluate.
- FAMILY or TEACHER ACTS – Family/Teacher Acts contain a Dowell student and one or more family members or teachers. These acts will be judged separately. They will not be eligible for the 1st – 3rd place prizes but can win the People’s Choice Award.
- Minimum time limit of each act is 2 minutes long.
- Maximum time limit is 5 minutes. This includes ANY set-up and tear down.
- Everything must be school appropriate- no curse words, no mention of violent acts, etc.
- Results will be posted outside E100 and on the Dowell Drama website at www.dowelldrama.weebly.com

TALENT SHOW REHEARSAL INFORMATION:
- Rehearsal is Oct. 7 from 4:00-7:30 on stage
- You MUST attend this rehearsal!
- We will rehearse your act onstage with microphones.
- You will get 2 complimentary tickets to the show

TALENT SHOW PERFORMANCE INFORMATION:
- Dowell’s Got Talent is Oct. 9 at 7:00 pm
- Tickets are $5.00

CONTACT: Colin Wells at cwells@mckinneyisd.net for questions regarding Dowell’s Got Talent.
DOWELL’S GOT TALENT 2015

Application (one per act)

Due Sept. 30 or Oct. 1

(Please Print)

Title for Group/Act: ____________________________________________________________

Performer Names:

___________________________________  _________________________________________

___________________________________  _________________________________________

___________________________________  _________________________________________

___________________________________  _________________________________________

Talent (i.e. dancing, singing, band): ______________________________________________
______________________________________________________________________________

Is there a Family Member or Teacher in your act?   YES   NO

Name of Song: ____________________________________________ (attach lyrics)

Artist: __________________________________________________

How many microphones will you need?   1   2   3

Remember that you must provide (or make arrangements for) needed sound equipment
(CD player and/or piano will be provided)

*** Each member of the act must complete a Parent/Student Acknowledgement Form ***

(Don’t forget to submit your lyrics with your application.)
STUDENT INFORMATION:

I have read the expectations that will need to be followed in order for me to participate in the talent show. I understand that the acts chosen are at the discretion of the judges and their decision is final. I will commit to being at rehearsals and performing in the talent show. I am aware that I will be a good representative of DMS while in practice and performing and that the decision of the judges will be final.

First name: ____________________ Last name: __________________ Grade Level: _________

Are you a Dowell Student? YES NO

Title for Group/Act: ____________________________________________

Home phone or Cell number: ________________________________

E-mail address: ________________________________________________

Student Signature: __________________________ Date: ________________

PARENT/GUARDIAN INFORMATION:

I have read the expectations that will need to be followed in order for my child to participate in the talent show. I am giving my permission for my child to participate in the auditions, rehearsals, and performances scheduled for this show. I understand that the acts chosen are at the discretion of the judges and their decision is final. I understand and support that my student will be required to present themselves in a manner that is appropriate and follows DMS and MISD policies at all functions associated with the talent show. I understand that the decisions of the judges will be final.

First name(s): __________________________ Last name(s): __________________________

Home phone or Cell phone number: ________________________________

E-mail address: ________________________________________________

Parent/Guardian Signature: __________________________ Date: ________________