

YOUTH ART DAY 2024 - Performance Registration Form - DUE 2/7/2024

Online registration form and event details are available on PCCA's website
perrycountyarts.org/youth-art-day



Student Information Please print legibly. All registration forms require a non-refundable \$3 fee per entry.

First Name

Last Name

Age: _____ Current Grade: _____ School Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Parent/Guardian Email: _____

Only complete the below section(s) that is applicable.

Dance/Drama

Dance/Drama Teacher's Name and Phone Number (if consulted): _____

Circle One: JAZZ TAP BALLET HIP HOP DRAMA COMEDY or SERIOUS POETRY RECITATION PROSE RECITATION OTHER: _____

Performance length(in minutes): _____ Years (to nearest 1/2) of Study: _____ \$ _____

Author/Choreographer of work to be performed: _____ Title of work/or description: _____

Circle one: SOLO GROUP Accompaniment - Circle one: Digital Piano Other: _____
**submit digital audio file along with registration form*

List names of other performers (if group presentation): _____

Music

Teacher's Name (Private or School) and Phone Number: _____

Years (to nearest 1/2) of Study: _____ Name of School Music Teacher (if consulted): _____

Circle one: PIANO VOCAL BRASS WOODWIND STRINGS PERCUSSION OTHER Specific Instrument: _____ \$ _____

Accompaniment needed - Circle one: Digital Piano Other Accompanist/Group Name(s)? _____
**submit digital audio file along with registration form*

1. Title of Composition: _____

Name of Composer: _____

2. Title of Composition: _____

Name of Composer: _____

List names of other performers (if group presentation): _____

We want everyone to have the opportunity to participate. For that reason, your fee may be waived if you are currently experiencing financial challenges. Please indicate on your registration form.----->

Request to waive fee

TOTAL DUE

\$ _____

YOUTH ART DAY 2024 - Lit/Visual Registration Form - DUE 2/7/2024

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perrycountyarts.org/youth-art-day



Student Information Please print legibly. All registration forms require a non-refundable \$3 fee per entry.

First Name

Last Name

Age: _____ Current Grade: _____ School Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Parent/Guardian Email: _____

Only complete the below section(s) that is applicable.

Literature

(English) Teacher's Name (if consulted): _____

Circle one:	COMIC ART	POETRY	ESSAY	SHORT STORY	Title: _____	\$ _____
Circle one:	COMIC ART	POETRY	ESSAY	SHORT STORY	Title: _____	\$ _____
Circle one:	COMIC ART	POETRY	ESSAY	SHORT STORY	Title: _____	\$ _____
Circle one:	COMIC ART	POETRY	ESSAY	SHORT STORY	Title: _____	\$ _____

I certify that all submitted work is my original work. I give to the Perry County Council of the Arts the right, privilege, and authority to use my entry in any form whatsoever and consent to its publication by the Council.

 Signature (student, guardian, or teacher) _____
 Date

List names of group members (if group project): _____

Visual Art & Video

Art Teacher's Name (if consulted) or N/A: _____

Category (choose from list): _____	Title or Description of Work: _____	\$ _____
Category (choose from list): _____	Title or Description of Work: _____	\$ _____
Category (choose from list): _____	Title or Description of Work: _____	\$ _____
Category (choose from list): _____	Title or Description of Work: _____	\$ _____

Complete an additional form if you need more space.

I certify that all submitted work is my original work. I understand that the Perry County Council of the Arts will make every attempt to protect my artwork. However, I agree that I will not hold either the Perry County Council of the Arts or the hosting school district liable for any damages that may occur. I give to the Perry County Council of the Arts the right, privilege, and authority to use my entry in any form whatsoever and consent to its publication by the Council.

 Signature (student, guardian, or teacher) _____
 Date

List names of group members (if group project): _____

We want everyone to have the opportunity to participate. For that reason, your fee may be waived if you are currently experiencing financial challenges. Please indicate on your registration form.----->

Request to waive fee

TOTAL DUE
 \$ _____