

Stillwater PTSA
2015 Talent Show Permission Form

Individual Act:

Student Name: _____

Grade/Teacher: _____

Act Name/Description: _____

Name of Song/Music: _____

Group Act: Please list all students in the act and turn in all permission slips together.

Student Name: _____ Grade: _____ Teacher: _____

Student Name: _____ Grade: _____ Teacher: _____

Student Name: _____ Grade: _____ Teacher: _____

Student Name: _____ Grade: _____ Teacher: _____

Student Name: _____ Grade: _____ Teacher: _____

Parent/Guardian Permission: I give my child permission to audition and perform in the Stillwater PTSA Talent Show. I have read and agree to the "Rules and Guidelines."

Parent Signature: _____ Phone Number: _____

Parent Name (Please Print): _____

Email: _____

(Email will be primary form of communication)