



**“Start to Star”  
2009 Saratoga County Fair Talent Contest  
Entry Form & Schedule**

**Contestants must answer all questions. Incomplete information in the following sections may result in a delay of acceptance. PLEASE PRINT OR TYPE. Enter either individual, duet and/or group category. Written proof of age must be submitted. This information does not have to be duplicated if a performer participated in the 2008 Talent Contest.**

**All entries are accepted through June 27 at 6:00 p.m. Please mail completed form to Audrey Poitras, 25 Collamer Drive, Ballston Spa, NY 12020 or drop off at the Fair Office.**

**For multiple entries, please photocopy the forms as needed.**

**INDIVIDUAL ENTRY (Include proof of age)**

<b>Name:</b> _____	<b>Age:</b> _____
<b>Address: (street, city, state &amp; zip code)</b> _____ _____	
<b>Telephone:</b> _____	<b>County of Residence:</b> _____
<b>Name of Talent Training School/Studio:</b> _____	
<b>Type of Act:</b> _____	<b>Approximate time of act ( max. 5 min)</b> _____
<b>Brief Description of Act: (Include Title of Music)</b> _____ _____ _____ _____	

**DUET ENTRY** (Complete both entries on this page)

<b>Name:</b> _____		<b>Age:</b> _____
<b>Address: (street, city, state &amp; zip code)</b> _____ _____		
<b>Telephone:</b> _____		<b>County of Residence:</b> _____
<b>Name of Talent Training School/Studio:</b> _____		
<b>Type of Act:</b> _____		<b>Approximate time of act ( max. 5 min)</b> _____
<b>Brief Description of Act: (Include Title of Music)</b> _____ _____ _____ _____		

<b>Name:</b> _____		<b>Age:</b> _____
<b>Address: (street, city, state &amp; zip code)</b> _____ _____		
<b>Telephone:</b> _____		<b>County of Residence:</b> _____
<b>Name of Talent Training School/Studio:</b> _____		
<b>Type of Act:</b> _____		<b>Approximate time of act ( max. 5 min)</b> _____

**GROUP ENTRY (3 or more performers: names and ages of each performer; include proof of age)**

<b>Name:</b> _____		<b>Age:</b> _____
<b>Address (street, city, state &amp; zip code)</b> _____ _____		
<b>Telephone:</b> _____	<b>County of Residence:</b> _____	
<b>Name of Talent Training School/Studio:</b> _____		
<b>Type of Act:</b> _____	<b>Approximate time of act (max. 5 min.)</b> _____	
<b>Brief Description of Act: (Include Title of Music)</b> _____ _____ _____ _____		

<b>Name:</b> _____		<b>Age:</b> _____
<b>Address (street, city, state &amp; zip code)</b> _____ _____		
<b>Telephone:</b> _____	<b>County of Residence:</b> _____	

<b>Name:</b> _____		<b>Age:</b> _____
<b>Address (street, city, state &amp; zip code)</b> _____ _____		
<b>Telephone:</b> _____	<b>County of Residence:</b> _____	

**PLEASE CHECK ONE APPROPRIATE CATEGORY**

SHOW	AGE GROUP	INDIVIDUAL	DUET	GROUP
Tuesday, July 14 1:30 p.m.	7 & Under OPEN			
Wednesday, July 15 6:00 p.m.	12 & Under MINI OPEN			
Thursday, July 16 6:00 p.m.	13 & Over MAXI OPEN			
Friday, July 17 6:00 p.m.	12 & Under MINI STATE			
Saturday, July 18 6:00 p.m.	13 & Over MAXI STATE			

**BEST OF FAIR COMPETITION WILL BE HELD  
SUNDAY, JULY 19 at 4:00 p.m.**

**For program lineup purposes, please indicate below any special requests concerning make-up, costume changes, etc. Such requests must be made prior to the day of the competition.**

Permission is hereby granted to the Saratoga County Agricultural Society (Saratoga County Fair) to use photographs of the below named person(s) for publicity/promotional purposes in any and all media.

\_\_\_\_\_

Print name of photographic subject

\_\_\_\_\_

Date of birth if under 18 yrs. of age

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

\_\_\_\_\_

Signature of subject or parent if  
subject is under 18 years of age

Date: \_\_\_\_\_

