



2009-2010 CITY OF SHAFER ROYALTY ENTRANCE APPLICATION



NAME: _____ AGE: _____

ADDRESS: _____

PHONE: _____ EMAIL: (OPTIONAL) _____

TALENT / SPORTSWEAR PRESENTATION DESCRIPTION: _____

SUPPLIES WE NEED TO SUPPLY FOR YOUR TALENT (i.e. microphone, hard surface for dance, tape/cd player, etc.):

Note: Please bring any props you may need to perform your talent.

POSTER / ESSAY SUBJECT: If you were Mayor what would you do and why?

By signing below, you acknowledge that you and your parents/guardian have read and understand the information and requirements for the City of Shafer Royalty Competition.

Participant Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____

