

BRINKLOW'S GOT TALENT

Act Application £2 per Act

Contact Information

Name	
Age	
Address	
Home Phone	
Mobile Phone	
E-Mail Address	

Category

Under 7's.....

8-12.....

13-16.....

16+.....

Name and Description of Act:.....

Parental Consent to perform if under 18

Child's Name:

Age:

Parents Name:

Parents Signature

Dated:.....

Consent to publicize information directly involving BGT – State Yes or No

Social Media _____

Radio _____

Television _____

Newspapers _____

Performer if over 18 or Parents Signature if under 8

_____ Dated: _____