

Storytelling Contest Spooky Stories, Tall Tales, Fables and more... October 6, 1pm-5pm Bucoda Washington

Rules and Information

Storytelling is the art of using language, vocalization and/or physical movement and gesture to reveal the elements and images of a story to a specific live audience. The storytelling Contest is a competition in which participants use language, vocalization, physical movement and gesture to reveal or interpret the elements and images of a story.

Age Categories: 11 and younger, 12-17, 18 and older

Eligibility: Story Subject:	Anyone is eligible to compete in the contest. The story should consist of a Spooky Story, Tall Tale, Fable or True experience.		
Time:	Stories shall be from three to seven minutes. A contestant will be disqualified if the speech is less than three minutes or more than seven minutes. Timing will begin with the contestants first definite verbal or nonverbal communication with the audience.		
Speaking order:	Each contestant will draw a number to decide their speaking slot. 11 and younger will start 1pm, then followed by 12-17 and then 18 and older.		
Props:	Props are allowed and should be managed by the contestant.		
Judging:	Constants will be judged on: Speech Development 50% (Opening, Build-Up, climax, Organization, Transitions and Creativity), Speech Delivery/Performance 30% (Manner, Confidence, and Gestures), Voice 20% (Volume, Variety, and Pace)		
Winners:	1 st , 2 nd and 3 rd place winners will be announced in each category.		
Microphone will not be available to contestants. The judges' decision is final.			
For more information please email gsharp@thurstonedc.com or call 360-878-3835			
To sign up please fill in the attached form and email it to George Sharp at <u>gsharp@thurstonedc.com</u>			

Check-in will begin at 12:15pm upstairs in the Bucoda Community Center.

Bucoda, Washington www.BOO-Coda.com	Storytelling Cont Spooky Stories, Tall Tales, Fabl October 6, 1pm-5p Bucoda, Washingto <u>Contestant Forr</u>	es and more m on
First Name:		
Last Name:		
Address:		
City:	State:	Zip
Phone:		
Email address:		
Speech Type: Spoo	ky Tall Tale Fable _	True experience

Estimated length:

The undersigned, in consideration of participation in any event held by The Town of Bucoda, releases and forever discharges the Town, its officers, elected officials, agents, employees and representatives, and any cooperating agencies involved in any event and their respective heirs, successors and assigns, from any and all actions, causes of action, suits, proceedings, debts, dues, contracts, judgments, damages, claims, and/or demands whatsoever in law or equity that the undersigned, its successors or assigns, ever had, now have, or may have in the future in connection with the undersigned's participation in any event held by The Town of Bucoda. The undersigned further agrees to indemnify, defend, and hold harmless the Town of Bucoda, its officers, agents, servants and employees, and any cooperating agencies involved in any event, their respective heirs, successors and assigns harmless from any claims by any others, including costs and expenses including attorney fees, for or on any account of all lawsuits or claims of any character whatsoever arising directly or indirectly out of or from the undersigned's participation in any event, including any claim for property damage and/or personal injury, including death. The foregoing release and indemnity shall apply regardless of any negligence or strict liability of the Town of Bucdoa except to the extent the loss is caused by the gross negligence or willful misconduct of the Town of Bucoda or as otherwise limited by law. By completing this registration form, I authorize that all necessary first aid steps may be taken as prescribed by qualified personnel. I acknowledge that the Town of Bucoda takes photographs at events, and I hereby consent that Town of Bucoda may use any photographs of me on their website, social media sites, pamphlets, or other media materials or for any purpose. Please complete and present this form the day of the contest.

Signature:	_Date:	
Printed Name:	_Birth Date:	_Age:
If under 18 years old:		
Guardian Signature	_ Date:	
Printed Name:		

Thank you for your interest in the Storytelling Contest. Please complete the form and email it to George Sharp <u>gsharp@thurstonedc.com</u>. For more information contact George at 360-878-3835.