



## BILL RILEY TALENT SHOW REGISTRATION FORM

To register for your local Bill Riley Talent Search please complete this form and return to local show coordinator, Alissa Doyle Ward, [alissaward@gamrathdoyle.com](mailto:alissaward@gamrathdoyle.com) .

Name: \_\_\_\_\_

Age: \_\_\_\_\_

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

Division (mark one):    Sprout (age 2-12) \_\_\_\_\_    Senior (age 13-21) \_\_\_\_\_

Type of Talent: \_\_\_\_\_

Song Name: \_\_\_\_\_

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

Town: \_\_\_\_\_    Zip Code: \_\_\_\_\_    County: \_\_\_\_\_

Email: \_\_\_\_\_    Phone: \_\_\_\_\_

(For multiple acts provide name, age and birth date - from left to right, as seen from the audience)