

AREA 4-H PERFORMING ARTS CONTEST REPORT
(Please print or type)

DUE May 15

Return to: 4-H PERFORMING ARTS
DEPT OF YOUTH DEVELOPMENT & AG EDUCATION
615 W STATE STREET
WEST LAFAYETTE IN 47907-2053

To be completed and sent in by Area Performing Arts Chairman.
Note: Each area may send 2 acts to Round-Up.
The alternate act for Round-Up and the other acts listed will be invited to perform at State Fair.

Summary of Area Contest
___ Number of group acts
___ Number of Curtain (musical) acts
___ Number of Curtain (non-musical) acts
<input type="checkbox"/> Total Number of Performers

Area _____
Area Chairman _____
Phone _____
Date of Contest _____

First Choice Round-Up Act:

Name of act _____ County _____
Name of 4-H Club _____
Person in charge of act _____ Phone _____
Address _____
(Street, Rural Route)

(Town) (State) (ZIP code)
Number of performers _____ Email: _____

Brief description of act: _____

Second Choice Round-Up Act:

Name of act _____ County _____
Name of 4-H Club _____
Person in charge of act _____ Phone _____
Address _____
(Street, Rural Route)

(Town) (State) (ZIP code)
Number of performers _____ Email: _____

Brief description of act _____

Alternate Choice Round-Up Act:

Name of act _____ County _____
Name of 4-H Club _____
Person in charge of act _____ Phone _____
Address _____
(Street, Rural Route)

(Town) (State) (ZIP code)
Number of performers _____ Email: _____

Brief description of act _____

The following acts were selected to perform at State Fair:

Curtain Act (Musical)

Name of act _____ County _____

Name of 4-H Club _____

Person in charge of act _____ Phone _____

Address _____

(Street, Rural Route)

(Town)

(State)

(ZIP code)

Number of performers _____ Email: _____

Brief description of act _____

Curtain Act (Non-Musical)

Name of act _____ County _____

Name of 4-H Club _____

Person in charge of act _____ Phone _____

Address _____

(Street, Rural Route)

(Town)

(State)

(ZIP code)

Number of performers _____ Email: _____

Brief description of act _____

Group Act

Name of act _____ County _____

Name of 4-H Club _____

Person in charge of act _____ Phone _____

Address _____

(Street, Rural Route)

(Town)

(State)

(ZIP code)

Number of performers _____ Email: _____

Brief description of act _____

The following acts were selected to perform at State Fair:

Curtain Act (Musical)

Name of act _____ County _____

Name of 4-H Club _____

Person in charge of act _____ Phone _____

Address _____

(Street, Rural Route)

_____ (Town)

_____ (State)

_____ (ZIP code)

Number of performers _____ Email: _____

Brief description of act _____

Curtain Act (Non-Musical)

Name of act _____ County _____

Name of 4-H Club _____

Person in charge of act _____ Phone _____

Address _____

(Street, Rural Route)

_____ (Town)

_____ (State)

_____ (ZIP code)

Number of performers _____ Email: _____

Brief description of act _____

Group Act

Name of act _____ County _____

Name of 4-H Club _____

Person in charge of act _____ Phone _____

Address _____

(Street, Rural Route)

_____ (Town)

_____ (State)

_____ (ZIP code)

Number of performers _____ Email: _____

Brief description of act _____

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