

PTO Talent Night Showcase Registration and Permission Form

Return this form to your teacher by March 15, 2019

TALENT OR PERFORMANCE _____

SONG or TITLE _____

List all performers' Names: (Please print clearly)

Permission is granted for:

(Name of Student) PLEASE PRINT

To participate in the PTO Talent Night Showcase on **April 24, 2019**.

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name:

Email: _____
(PLEASE PRINT)
Telephone: _____

Parent/Guardian Signature:

PTO Talent Night Showcase Registration and Permission Form

Return this form to your teacher by March 15, 2019

TALENT OR PERFORMANCE _____

SONG or TITLE _____

List all performers' Names: (Please print clearly)

Permission is granted for:

(Name of Student) PLEASE PRINT

To participate in the PTO Talent Night Showcase on **April 24, 2019**.

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name:

Email: _____
(PLEASE PRINT)
Telephone: _____

Parent/Guardian Signature: