

“HHA’s Got Talent” Participation Form

Sunday, May 7th at 4:00pm at the HHA Gymnasium

Name: _____

I am a... (please check one)

____ Student in grade _____

____ Alumni who graduated in _____ year

____ Faculty member who has been here _____ years

____ Family member of _____

Email Address: _____

Phone #: _____

Talent: _____

Do you need any necessary props or equipment, if so what?

Amount of space needed? _____

Any assistance needed, if so what kind? _____

***If you need any specified music, sound effects, etc., you are responsible for bringing it on a flash drive and it needs to be easily identifiable and brought with you the day of your practice. You can email your music to us at dsshuler@yahoo.com. If you are unable to do either one of these please let us know as soon as possible so we can try and find another way to send it through our sound system.**

*** We will provide mics, mic stands, boom stand, music stand, and amps (acoustic & electric).**

Please tell us a little more about yourself or your act: _____
