

Parkway Manor Elementary
Lip Sync Showcase Registration Form
DUE FEBRUARY 23, 2016

Will you be performing as an **INDIVIDUAL** or **GROUP** ? *circle one*

Who will be performing? Maximum of 6 students per group.

Please include everyone's name, teacher, and contact info.

****Each student in the group must complete and sign a Registration Form.**

Full Name	Teacher	Phone/ Email

Which parent(s) will be providing **transportation** for your group?

Name(s): _____ / _____

Phone : _____ / _____

Email : _____ / _____

What **song** will you lip sync? _____

Original Artist _____

Length of song _____

We have read, agree to, and signed the attached rules and guidelines of the Parkway Manor Lip Sync Showcase, of which a copy will be returned for our records.

Parent Signature _____ Date _____

Student Signature _____ Date _____

Registration Checklist:

___ Rules & Guidelines ___ Registration Form ___ CD or Flash Drive (music) ___ Printed Lyrics