WALWORTH COUNTY 4-H DRAMA FEST ENTRY FORM

Event Date: Sunday, May 5, 2019 Entry Deadline: 5:00 p.m. - April 19, 2019

Club:						
Title of Play:			Author:			
	Exact Pe	rformance Length	(Max 15 min):	min.		
**Note:	Use a separate	e form for each play.*	* (Not	including set-u _l	p/take-down time)	
Type of Performar	nce (ex: play, so	cene, monolog, improv	, puppets):			
Preferred Perform	nance Time Slot	on May 5:				
practices in the pr the screened 4-H safety of our 4-H	resence of ano volunteer, alor members.	d Adult Volunteers Mither screened 4-H volung with that of the direction o	unteer. If that is the c ector. Thank you for v	ase, please pro working with u	vide the name of s to ensure the	
Director:			Screened Adult V	olunteer:		
			(If different from director)			
Phone Number:			Phone Number:			
		d in the program?	E-mail:			
(Circle)	YES	NO		Would you like to be listed in the program?		
			(Circle)		NO	
		CAST OF C	HARACTERS		eck if member a Cloverbud	
Character:			Played By:		Clayerbud	
			-		Cloverbud? Cloverbud?	
-					Cloverbud?	
					Cloverbud?	
					Cloverbud?	
					Cloverbud? 🗌	
					 Cloverbud? □	

CAST OF CHARACTERS (continued)

Played By:	
	Cloverbud? 🔲
	Cloverbud? 🔲
	Cloverbud? 🔲
_	Cloverbud? 🔲
_	Cloverbud? 🔲
	Cloverbud? 🗌
<u> </u>	Cloverbud? 🗌
MEMBERS	
Member's Name:	
	Cloverbud? 🔲
	Cloverbud? 🗌
	Cloverbud? 🔲
_	Cloverbud? 🔲
	Cloverbud? 🔲
	Cloverbud? 🗌
	Cloverbud? 🔲
	Cloverbud? 🗌
	Cloverbud? 🗌
	Cloverbud? 🗌
r to know on office or Arts Council	
	r to know

Return by 5:00 p.m. – Friday, April 19, 2019:

Walworth Co. Extension Office - Drama Fest 100 West Walworth Street PO Box 1001 Elkhorn, WI 53121

Performers and their families are asked to stay to watch and support other actors. Also, please stay after the show for the 4-H Awards Ceremony! See if you or your club won an award!