

OFFICIAL ENTRY FORM

I, (BELOW SIGNED) HEREBY AGREE TO PARTICIPATE IN THE STAR OF THE FAIR COMPETITION IN CONSIDERATION OF THE JUDGES PERMITTING ME TO PARTICIPATE. For this I will pay a fee of

\$45 for early registration or \$60 for late registration which will include admission to the Delta Fair Star of the Fair Competition.

1. To fully comply with all instructions given by Delta Fair / Expo South representatives and the rules of the contest, particularly (but not limited to) rules concerning age requirements, Star of the Fair guidelines, Sr Division Qualifying and Semifinal Rounds Sunday, September 3, 2023, Jr. Division Qualifying and Semifinal rounds Monday, September 4, 2023, and Final Round Tuesday, September 5, 2023, times and safety of persons and property.

2. To release the sponsors, its licensees its corporate licensees, its parent, corporations, their affiliated entities and their respective officers, directors, shareholders, agents, employees, and representatives from any and all claims, demands, causes, or action, losses, expenses, costs and liabilities of any nature whatsoever which may arise out of or in connection with my participation in the audition process.

3. To grant the Stations and its licensees the right to use my name, likeness, recorded voice, and biographical material in order to advertise, promote, and publicize the Stations, the audition, the contest, the outcome of the audition or any advertisers, co-sponsors associated with the audition process.

Star of the Fair, Expo South & Delta Fair, Inc. by the signature below, are hereby held harmless from all damages, injuries, losses, judgments, and claims, both known and unknown, which may be incurred to persons, property, whether immediately reported or not, as a result of participation in this contest. I assume full responsibility for this exposure. Your signature on the registration form acknowledges that you have read and will adhere to all the rules in the registration packet.

Name:						
Address:						
Email:	Phone Number:					
Age	_Birth date:		Which Division?	Junior	Senior	
Phone Numbers: Contestant:						
Parent/Guardian (if applicable):						
Run my card for \$45 – Signature:						
Check enclosed for \$45 made out to "Delta Agribusiness."						
□						
Credit Card Number:			Expiration:	Sec Code		
Zip code of where credit card bill is mailed:						
Vocal Coa	ich:	_Vocal Studio:	Phone Number:			
Final Rour	nd Song Selection:					
Contestan	t Signature:			date		
Parent/Guardian Signature:				date		