

# Howard County Has Talent

Chairperson - Mary E. F. Streaker (410-382-7135)

**Thursday, August 9<sup>th</sup> - 7:30 PM**

**Entertainment Stage by Dining Hall**

**SONGS · DANCING · COMEDY ACTS · INSTRUMENTAL NUMBERS**

**3 to 5 Minute Time Limit**

**\$1,500.00 - To Be Awarded In Various Age Groups**

## **RULES**

1. Contest open to residents of Howard County and adjoining counties.
2. Entry forms will be available **Online**, at the **Fair Office** during the week of the Fair and until 7:00 pm on the day of the contest, and at the **Entertainment Stage**, by the Dining Hall, from -7:00 - 7:30 pm on Thursday evening.
3. Contestants will be divided by age into three categories:
  - Children's Group - 9 years old and under
  - Youth Group -- 10 to 15 years old
  - Teenage/Adult Group -- 16 years old and older
4. The Groups will perform as follows:
  - Children's Group Show begins at 7:30 pm
  - Youth Group Show follows Children's Group
  - Teenage/Adult Group Show follows Youth Group
5. The judges' evaluations will be calculated and awards will be made **after Youth Group and at end of show**.
6. Cassette tapes or CD's may be used to accompany performers. A piano will be available and on stage. Band groups will hook up to electric equipment provided by management. **ALL CONTESTANTS SHOULD PLAN FOR EXPEDIENT SET-UP.**
7. Premium money of \$500.00 will be awarded as follows in each Group: **First--\$150; Second--\$100; Third--\$75; Fourth--\$50; Fifth--\$25; Sixth--\$20; All Others--\$15.**
8. The Howard County Fair Association reserves the right to approve both the content and expression of any act. A representative of the HCFA shall have the authority to prohibit or cancel in progress any act that such representative determines, in his/her sole discretion, is not in keeping with the family atmosphere of the Fair. Please plan your act accordingly.

**2018  
Howard County Fair  
Amateur Variety Show**

**APPLICATION**

**Date:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Type of Act:** \_\_\_\_\_

**Name of Act:** \_\_\_\_\_

**Name(s) of Participant(s):** \_\_\_\_\_

\_\_\_\_\_

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