

TALENT CONTEST

Superintendent: Katie Perkins (618) 267-8084

Thursday, August 1 • 6:30 PM • Grandstands

All contestants must be entered by July 25, 2019.

Submit to: Bond County Fair, PO Box 426, Greenville, IL 62246 or bondcofair@gmail.com

RULES:

1. Any type of talent may be performed (lip sync, dance, comedy, musical, etc., as approved by officials).
2. One must have his or her own accompanist or CD. Vocalists cannot use CD with background vocals (it can only be the song the contestant is using).
3. An act may not be more than 4 minutes.
4. There will be no exception to the age divisions, which are as follows:
 - Junior Division: 14 and under (14 years old or younger on the day and date of the county fair talent show.)
 - Senior Division: 15-21 (Cannot be over 21 years of age on the day and date of the county fair talent show.)
5. You may not participate if you have been paid a fee for performing in your area of talent. (Example: A dancer who has been paid may enter as a singer, but not a dancer.)
6. Children under 14 must have parental consent.
7. Must be a resident of Illinois. The entry or act can only represent one county fair.

JUDGING:

Each act will be judged on the following:

1. Appearance, 2. Talent, 3. Showmanship

Winners may represent Bond County at the State Fair Convention in Springfield in January.

Winners in Springfield are eligible for scholarship money and cash prizes.

A Junior Division contestant at the state contest cannot return to the State Level Junior Division again. A previous Junior Division contestant can compete at the State contest in the Senior Division, provided the contestant is 15 years of age and under 22 years of age. No Senior Division contestant can return to the State Contest as a participant. In either division a contestant competing as a single can come back in a group or if in a group, can come as a single, one time.

PRIZES

JUNIOR & SENIOR DIVISIONS

1st: \$50

2nd: \$40

3rd: \$30

Talent Show Application:

Name: _____

Address: _____

City: _____ **Zip:** _____

Phone Number: _____

Kind of Act (Include a brief description):