

"CASA's Searching for the Stars"

ELIGIBILITY

- This event is open to anyone who would like to participate!
- Under 18: EVERY CONTESTANT under the age of 18 must have permission from a parent or legal guardian to audition AND must be accompanied by a parent or guardian at the audition location and later to the finals location if applicable. If a parent or legal guardian is unable to attend, but is allowing the minor to attend under the supervision of a third-party (such as a coach), your parent or legal guardian must do two (2) things:
 - o Complete the Guardianship and Authorization for Minors form included in this Entry Form.
 - o Designate the third-party acting as guardian on the Personal Release. Both documents must be signed by the parent and/or legal guardian and the third-party acting as guardian.
- Animal acts are accepted however **all acts with animals must include an up to date immunization record for each animal when submitting their entry form.**

Auditions will be Saturday, July 30, 2011 at 6 pm at the Stillwater Community Center and are open to anyone who would like to perform and have the chance to move forward in the fundraising event. The entry fee is \$25 and must be included with the entry form. Make checks payable to Payne County CASA or pay online at www.casaforkids.com and Click the Donate Now button. Designate your entry name in the subject line. You will receive an email confirmation for your paid entry.

Deadline for entries is July 15th by 5 pm. The auditions will be scored by a panel of three judges based on stage appearance and personality, originality and creativity, audience response, delivery and overall performance. Six semi finalists and three alternates will be chosen on July 30th to move on and compete at CASA's annual fundraising event on February 4, 2012 at 6 pm. The six finalists will compete for the Searching for the Stars trophy and prize packages.

Entries will also be accepted via YouTube until July 15th at 5 pm. All performances both live and video must be two minutes or less. Entries longer than two minutes will be disqualified. For YouTube submissions simply email a link to your YouTube entry video to info@casaforkids.com. Your video submission will not be considered until your entry form and fee are also received- they must be received by the deadline. All YouTube submissions will go through a pre qualifier panel made up of Payne County CASA Fundraising Committee members. The chosen YouTube entries will be shown at the live auditions on July 30th to the panel of three judges and the audience and given the same opportunity for a chance to be one of the six finalists.

The top six finalists as determined at the auditions will then perform at the 12th Annual Hearts Go Out for Children Gala Fundraiser on February 4, 2012 at 6 pm at the Payne County Expo in front of 300-350 guests. The Hearts Go Out for Children Gala is a formal event that consists of the Searching for the Stars show, an upscale dinner, open bar, dancing, auctions and games. The overall winner will be determined by using 50% of the finalist's points determined by pledges/funds raised plus 50% of the scores given by the same panel of three judges. The six finalists will have three months to prepare for their individual pledge campaigns which will kick off on November 16, 2011. CASA will assist each finalist with their campaign. Pledges/donations/dollars raised become points. For example, \$1 = 1 point. Should a contestant drop out their pledges will automatically transfer to the alternate that takes his/her/their place. More detailed information will be provided to the six finalists and three alternates upon selection. For questions call 405-624-2242 or email info@casaforkids.com. Payne County CASA is a 501 (c) 3 not for profit agency and all pledges/donations are tax deductible. The auditions on July 30, 2011 will be open to the public, first come first serve, for the first 700 guests. The cost to enter will be \$5 for adults. Children under 12 are free.

PAYNE COUNTY CASA RESERVES THE RIGHT TO REFUSE AN AUDITION TO ANY INDIVIDUAL OR ACT FOR ANY REASON OR NO REASON AT ALL, AT THE SOLE DISCRETION OF PAYNE COUNTY CASA.

"CASA's Searching for the Stars"
Audition Contestant Information Form

Thank you for applying to be a contestant for CASA's Searching for the Stars. Please read this Contestant Information Form carefully as some sections apply to solo acts and others to groups only. Payne County CASA reserves the right, exercisable at any time in its sole discretion, to disqualify you or any member of your act from the competition or the audition process should such individuals supply untruthful, inaccurate or misleading personal details or information or for any other reason whatsoever. **ALL ACTS MUST BE TWO (2) MINUTES OR LESS!** Acts longer than two (2) minutes will be disqualified. Good luck!!!

STAGE NAME (IF APPLICABLE) (This is how you will be introduced): _____

BRIEFLY DESCRIBE YOUR ACT: (This is how you will be introduced) _____

SOLO ACTS: IF YOUR ACT INCLUDES YOU ALONE, PLEASE FILL OUT THIS PAGE, SKIP PAGE 2 AND COMPLETE THE REST OF THIS ENTRY FORM.

GROUP ACTS: IF YOUR ACT INCLUDES 2 OR MORE PEOPLE, THE MAIN CONTACT PERSON FOR THE GROUP MUST COMPLETE THIS ENTIRE APPLICATION, INCLUDING LISTING ALL MEMBERS OF THE GROUP ON PAGE 2. EACH MEMBER OF THE GROUP MUST STILL FILL OUT PAGES 3-6 OF THIS ENTRY FORM.

NAME: _____ HOME PHONE: _____

ADDRESS: _____ CELL PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL ADDRESS: _____ DOB: _____

IF YOU ARE A GROUP, HOW MANY PEOPLE ARE IN YOUR GROUP: _____ AND WHAT IS THE AGE RANGE OF YOUR MEMBERS (for example: 6 - 14 years old): _____ OF THIS NUMBER, HOW MANY ARE UNDER THE AGE OF 18 YEARS? _____

TALENT CATEGORY (check ALL that you think apply to your act):

SINGER _____ MUSICIAN ___ DANCER __ MAGICIAN ___ ANIMAL ACT _____

JUGGLER __ ACROBAT __ COMEDIAN OTHER (Please explain): _____

PLEASE LIST THE TITLE AND ARTIST OF THE SONG(S) YOU ARE SINGING AND/OR PERFORMING TO:

_____ **ANY ACCOMPANIMENT/SONG/MUSIC MUST BE PROVIDED ON A CD WITH THIS ENTRY FORM!***

PLEASE LIST ANY NEEDS YOU/YOUR GROUP WILL REQUIRE FOR YOUR PERFORMANCE SUCH AS NUMBER OF MICROPHONES, PIANO, CHAIR, ETC: _____

PLEASE LIST HOW MUCH SET UP TIME (IF ANY) YOUR ACT WOULD REQUIRE PRIOR TO YOUR PERFORMANCE: _____

PLEASE LIST WHAT THE ABOVE SET UP TIME (IF ANY) ENTAILS I.E. SETTING UP DRUM SET, SETTING UP CHAIRS, TABLES, ETC. _____

* ENTIRES REQUIRING MUSIC WILL BE DISQAULIFIED IF MUSIC IS NOT PROVIDED AT TIME OF ENTRY.

GROUP INFORMATION SHEET

PLEASE LIST ALL MEMBERS OF YOUR GROUP STARTING WITH THE NAME OF THE MA IN CONTACT PERSON WHO COMPLETED PAGE 1, IF THAT PERSON ALSO PERFORMS IN THE ACT.

1. NAME _____ PHONE: _____ DOB: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

2. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

3. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs.): _____ DOB: _____

4. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

5. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

6. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs.): _____ DOB: _____

6. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

8. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

9. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____ DOB: _____

10. NAME: _____ PHONE: _____
 PARENT/LEGAL GUARDIAN (if under 18 yrs): _____

IF SPACE IS NEEDED FOR ADDITIONAL GROUP MEMBERS, PLEASE COPY THIS PAGE TO LIST ADDITIONAL MEMBERS AND ATTACH ALL ADDITIONAL PAGES BEHIND PAGE 2.

NOTE: EACH MEMBER OF THE GROUP MUST FILL OUT PAGES 3-6 BELOW.

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CONTESTANT INFORMATION

PAGES 3-6 MUST BE COMPLETED BY EVERY CONTESTANT. FOR GROUPS THIS INCLUDES EACH PERSON LISTED ON PAGE 2 INCLUDING THE MAIN CONTACT PERSON IF THAT PERSON ALSO PERFORMS IN THE ACT.

STAGE NAME OR GROUP NAME: _____

NAME: _____ HOME PHONE: _____

ADDRESS: _____ CELL PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

DATE OF BIRTH: _____

E-MAIL ADDRESS: _____ NUMBER OF PEOPLE IN YOUR ACT: _____

PARENT/LEGAL GUARDIAN (if under 18 yrs old): _____

LIST ANY WEBSITES (INCLUDING SOCIAL NETWORKING SITES SUCH AS MYSPACE, FACEBOOK, FRIENDSTER, TWITTER, ETC. THAT YOU CONTROL OR YOUR ACT MAY CURRENTLY BE SEEN ON OR POSTED ON AFTER THE AUDITIONS (IF NONE, PLEASE STATE NONE IN THE SPACE BELOW):

WHAT MAKES YOUR ACT THE WINNING ACT?

HOW LONG HAVE YOU BEEN DOING YOUR ACT?

WHAT MADE YOU START DOING YOUR ACT AND WHAT DRIVES YOU TO KEEP PURSUING IT?

WHO IN YOUR LIFE DO YOU WANT TO MAKE THE MOST PROUD & WHY? WHO HAS BEEN YOUR BIGGEST SUPPORTER?

WHO ARE YOUR HEROES PERSONALLY AND PROFESSIONALLY?

TELL US SOMETHING ABOUT YOURSELF MOST PEOPLE WOULD NOT KNOW.

ARE YOU FAMILIAR WITH THE CASA PROGRAM? IF SO WHAT DO YOU THINK ABOUT IT?

HOW DO YOU FEEL ABOUT ASKING FOR PLEDGES ON YOUR BEHALF TO BENEFIT CASA SHOULD YOU MOVE ON IN THE COMPETITION?

IF YOU BECOME A FINALIST WHO IS THE FIRST GROUP OR PERSON YOU WILL ASK FOR A PLEDGE AND WHY?

ELIGIBILITY QUESTIONNAIRE

STAGE NAME OR GROUP NAME: _____

LEGAL NAME: _____ HOME PHONE: _____

ADDRESS: _____ CELL PHONE: ____ _____

CITY: _____ STATE: _____ ZIP: _____

PLACE OF BIRTH:
(COUNTY & STATE)

DATE OF BIRTH:

E-MAIL ADDRESS:

NAME OF PARENT OR LEGAL GUARDIAN (if under 18 yrs. old): _____

1. HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY? (PLEASE DO NOT PROVIDE INFORMATION REGARDING CONVICTIONS FOR WHICH THE RECORD HAS BEEN JUDICIALLY ORDERED SEALED, EXPUNGED OR STATUTORILY ERADICATED).

YES NO IF YES, PLEASE EXPLAIN: _____

2. HAVE YOU HAD ANY INVOLVEMENT WITH DHS/CHILD WELFARE? IF SO WHAT? _____

3. DO YOU HAVE AN AGENT? IF SO, LIST YOUR AGENT'S NAME AND TELEPHONE NUMBER (IF APPLICABLE): _____

4. DO YOU HAVE A MANAGER? IF SO, LIST YOUR MANAGER'S NAME AND TELEPHONE NUMBER (IF APPLICABLE): _____

ALL ENTRANTS MUST SIGN THIS FORM

**IF THE ABOVE INDIVIDUAL/ENTRANT IS UNDER THE AGE OF 18 YEARS,
THE PARENTS OR LEGAL GUARDIAN OF SUCH PERSON SHOULD SIGN BELOW.**

Please check mark which applies to you:

___I hereby warrant that I am the parent and/or legal guardian of the individual who signed the foregoing Contestant Information Form, that I am at least 18 years of age, that I have caused said individual to execute said Contestant Information Form, that I will not instruct, authorize or permit said individual to disaffirm the foregoing Contestant Information Form and that I agree to:

___I hereby warrant that I am the contestant in above mentioned Contest Information Form and that I am 18 years of age or older and that I agree to:

Defend, indemnify and hold harmless the Payne County CASA Association, Inc and all officers, board members, and employees, the owners and managers of all facilities, participants and event volunteers from and against any and all liability, loss, expense or claims for injury or damages arising from, but not limited to, participation in any and all activities for the CASA's Searching for the Stars events and during any travel to and from any event related to such.

I agree to cause said person and myself to adhere to all of the provisions of said Contestant Information Form. In addition, in consideration for my/my child/ward's possible participation in the auditions, I hereby agree to be bound by and to perform all of the terms and conditions of the foregoing Contestant Information Form, as such terms and conditions may relate to my participation or the participation of my child/ward in the auditions and the audition process, if any (including but not limited to the taping of my appearance in connection with the event and the audition process and the use of my or my child's/ward's name, voice, likeness, etc.).

I also hereby agree that if I am selected as a finalist that I will be available for photographs, video interviews and for dress rehearsal(s) as determined and scheduled by Payne County CASA in conjunction with all the finalists. I also hereby agree that any and all pledges/dollars/donations raised will be turned in to Payne County CASA by the deadline given to me by the program. I agree that if for any reason whatsoever I should drop out of the competition at any point before or during the campaign period that all pledges raised on my behalf will automatically transfer to the contest(s) that take my place in the competition. All pledges/proceeds benefit Payne County CASA Association, Inc.

SIGNATURE: _____

PRINT NAME: _____

RELATIONSHIP TO MINOR (if applicable): _____

EMAIL & PHONE: _____

IF THE ABOVE PARENT/LEGAL GUARDIAN (Listed in Page 6) WILL BE NOT PRESENT AT AUDITION/EVENTS, THE PARENT OR GUARDIAN SHOULD ALSO SIGN BELOW

I hereby authorize or permit _____ ("Individual Accompanying Minor") to accompany my minor child/ward to participate in the auditions and interviews. I hereby release Payne County CASA, and each of their respective affiliated Board of Directors, any volunteers and staff from and against any and all claims, liabilities and expenses related to or connected with any such person accompanying my minor child/ward to the auditions, interviews, and/or Program.

SIGNATURE: _____ DATE: _____

**INDIVIDUAL ACCOMPANYING MINOR (NOT PARENT OR GUARDIAN)
MUST ALSO SIGN BELOW**

I represent and warrant that I am the Individual Accompanying Minor designated by the minor's parent/guardian above. I have agreed to be responsible for the safety, health, and welfare of the minor during the audition process. In addition, for good and valuable consideration, the receipt and sufficiency which is acknowledged herein, I hereby agree to be bound by and to perform all of the terms and conditions of the foregoing Contestant Information Sheet (including, without limitation, the provisions regarding release of all claims), as such terms and conditions may relate to my possible or actual participation in the Program, if any (including but not limited to the taping of my appearance in connection with the Program and the use of my name, voice, likeness, etc.).

SIGNATURE: _____ DATE: _____

RELATIONSHIP TO MINOR: _____

EMAIL & PHONE: _____