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## 2020 Jingle Bells Audition Form

The Jingle Bells Telethon raises money to provide Christmas food baskets and toys to over 850 families in our community and neighboring counties. The Jingle Bells Foundation needs your talent to make it all possible. This year, we are looking for around 3 minute acts to perform LIVE during the telethon on **December 12<sup>th</sup> at Alexandria Area High School**. If you are unable to perform live, please specify that on this form.

**Please answer the questions on BOTH sides of the form and then return the form to the registration area.**

PLEASE PRINT CLEARLY

Name of group/individuals and ages (if desired): \_\_\_\_\_

\_\_\_\_\_

Type of act: \_\_\_\_\_ Length of performance: \_\_\_\_\_

Where is the group/individuals from? \_\_\_\_\_

Size of group: \_\_\_\_\_

School/Employed at: \_\_\_\_\_

Parents/Family (if under 18): \_\_\_\_\_

Instruments/equipment used: \_\_\_\_\_  
(Piano, music file, CD, amp, etc.)

Special needs and quantity: \_\_\_\_\_  
(Electrical power, microphone, music stand, chair, amp, etc.)

Judges are looking for the following when choosing talent to perform in the telethon:

**\*\*\*Originality\*\*\***

**\*\*Talent\*\***

**\*\*Overall Entertainment Quality\*\***

Would you like to perform one or two acts (depending on time) during auditions? Please keep your selections between 2-4 minutes in length!

Song titles or acts for auditions: (Will these be also used the night of the telethon? \_\_\_\_yes \_\_\_\_no if not please specify.)

1. \_\_\_\_\_

2. \_\_\_\_\_

**Mailing address and phone number of contact person:**

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

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

(Please answer questions on **BOTH** sides of the form)

## 2020 Jingle Bells Information Sheet

The information that you are providing will be used when you are introduced during the telethon.  
**THIS MUST BE COMPLETED!**

Have you ever appeared on Jingle Bells before?

Yes \_\_\_\_\_ if so, when? \_\_\_\_\_ No \_\_\_\_\_

Other interests, hobbies, when did you become interested in your talent, why did you decide to try out for Jingle Bells, etc?

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Are you willing to perform a second selection if time permits?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you available anytime between 5:00 pm and 10:00 pm on Saturday, December 12<sup>th</sup> for the telethon?

Yes \_\_\_\_\_ No \_\_\_\_\_

***If unable to perform LIVE on December 12<sup>th</sup>, please specify here*** \_\_\_\_\_

**The Jingle Bells Foundation would like to thank you for auditioning!**

### **Waiver**

We give the Jingle Bells Foundation the privilege to use our photos, name, act, video, etc. on any & all forms of media that they may choose.

X \_\_\_\_\_

Signature of Talent Act OR Parent/Guardian over 18 years of age