

Registration Sheet

| Name of Contact: | | |
|--|---|--|
| Cell Phone Number: | Email: | |
| Name(s) of ALL Performer(s): | | |
| | C Ctudent C Coulty C Ctoff | |
| Please describe your performance/act: | | |
| Please describe any special needs you m | song and artist? | |
| (behind the cafeteria) No vulgarity, pyrotechnics, fire, smok A professional Sound System and Do | I will be provided. Performers must provide all props, usic they need for the performance. DJ can provide music | |
| By signing below you agree to abide be above requirements. | y all college policies and procedures and the | |
| Signature | Date | |