

Endeavor Extravaganza Permission Form

Student's Name:

Grade:

Teacher:

Type of Performance:

If in a group, the names of ALL the members:

Name of your act or group:

Props Needed:

*NOTE-If you have a sibling auditioning, please list their name(s). We will try our best to make audition times compatible.

Email Address:

Contact Number:

Parent Signature:

If you have any questions, please contact Mrs. Norris at 254-8622, or lisa.norris@k12.sd.us.

**FORM is due Monday, March 12th. Please give them to Mrs. Norris or the office. Thanks and good luck! ;0)