



The Saratoga COUNTY FAIR

Talent Competition Application

Thank you for your interest in the Saratoga County Fair Talent Competition. This application form needs to be completed in entirety in order to be accepted.

In addition, written proof of age must supplement this application form.

All entries will be accepted through July 14, 2018 at 5:00pm.

Please mail your completed forms to:



2018 Talent Show Entry
162 Prospect Street
Ballston Spa, NY 12020

Or email to:
entries@saratogacountyfair.org





“Saratoga’s Got Talent”
2018 Saratoga County Fair Talent Contest

INDIVIDUAL ENTRY (Include proof of age)

Please Select category:

7 & Under Open	8—12 Open	13 & Over Open	12 & Under State Fair	13 & Over State Fair
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Type of Act:	Approximate time of act (max. 5 min.)
Brief Description of Act: (Include Title of Music)	

Contestant Name:		Age:
Address: (street, city, state & zip code)		
Telephone:	County of Residence:	
Email contact:		
Name of Talent Training School/Studio:		



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DUET ENTRY

(Complete both entries on this page—Include proof of age)

Please Select category:

7 & Under Open	8—12 Open	13 & Over Open	12 & Under State Fair	13 & Over State Fair
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Type of Act:	Approximate time of act (max. 5 min.)
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Brief Description of Act: (Include Title of Music)

Contestant 1 Name:	Age:
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Address: (street, city, state & zip code)

Telephone:	County of Residence:
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Email contact:

Name of Talent Training School/Studio:

Contestant 2 Name:	Age:
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Address: (street, city, state & zip code)

Telephone:	County of Residence:
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Email contact:

Name of Talent Training School/Studio:



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GROUP ENTRY (3 or more performers): Page 1

Names and ages of each performer; include proof of age
 For multiple entries, please photocopy the forms as needed.

Please Select category:

7 & Under Open	8—12 Open	13 & Over Open	12 & Under State Fair	13 & Over State Fair
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Type of Act:	Approximate time of act (max. 5 min.)
Brief Description of Act: (Include Title of Music)	

Contestant 1 Name:		Age:
Address: (street, city, state & zip code)		
Telephone:	County of Residence:	
Email contact:		
Name of Talent Training School/Studio:		

Contestant 2 Name:		Age:
Address: (street, city, state & zip code)		
Telephone:	County of Residence:	
Email contact:		
Name of Talent Training School/Studio:		



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GROUP ENTRY (3 or more performers): Page 2

Names and ages of each performer; include proof of age
 For multiple entries, please photocopy the forms as needed.

Please Select category:

7 & Under Open	8—12 Open	13 & Over Open	12 & Under State Fair	13 & Over State Fair
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Type of Act:	Approximate time of act (max. 5 min.)
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Brief Description of Act: (Include Title of Music)

Contestant 3 Name:	Age:
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Address: (street, city, state & zip code)

Telephone:	County of Residence:
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Email contact:

Name of Talent Training School/Studio:

Contestant 4 Name:	Age:
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Address: (street, city, state & zip code)

Telephone:	County of Residence:
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Email contact:

Name of Talent Training School/Studio:



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**Permission is hereby granted to the
Saratoga County Agricultural Society (Saratoga County Fair)
to use photographs of the below named person(s)
for publicity/promotional purposes in any and all media.**

Print name of photographic subject

Date of birth if under 18 yrs. of age

Street Address: _____

City, State, Zip: _____

Signature of subject or parent if
subject is under 18 years of age

Date: _____