

4-H Drama Festival Registration Form

Club Name: _____

Category (check one):
 Regular Drama
 Mini Drama
 Skit

Amount of time allotted for your performance

PLEASE CIRCLE ONE

5 minutes 10 minutes 15 minutes
20 minutes 25 minutes 30 minutes

Title: _____

Drama Leader(s):

Name	Address	City	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Participants:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please return completed form to:

Extension – Clark County Office
Drama Festival Registration
517 Court Street, Room 104
Neillsville, WI 54456

Or email a copy to:
ClarkCounty4H@co.clark.wi.us

Registrations due 2 weeks before event

