Euclid School PTA's



Where: Hasbrouck Heights High School Auditorium, located at 365 Boulevard, Hasbrouck Heights - 07604

When: Friday, February 28, 2020 (Mandatory Dress Rehearsal on Thursday, February 27, 2020)

Why: A fun opportunity to showcase the unique abilities and skills of our students

Important Information to know:

- All acts (including music) must be 3 minutes or less
- Acts must be free of any inappropriate or vulgar language
- Acts cannot contain any weapons, glass or liquids
- All participants must be current students at Euclid School (PreK-5th grades)
- Students may participate solo or as a group
- Siblings can perform together but, can only perform in 1 show
 ~(to be clear) students cannot participate in more than one act
- If your child wants to be an MC for the event there will be try-outs, date to follow ©
- There will be 2 shows; Prek-2 and, 3-5
- Tickets for each act will be sold in advance and will go on sale soon
- Please submit final music edits by, Thursday, February 20, 2020 to: Corinne@EuclidSchoolPTA.com
- Please submit any visual (pictures, videos etc.) by February 20 to: Quan@QuantessentialsFilms.com
- When submitting audio/visual files please enter performer/group name in Subject Line of email
- Please contact Jennifer Dunbar: Mrs.Dunbar@yandex.com or,
 Corinne Ponte Corinne@EuclidSchoolPTA.com with any questions or concerns (thank you)

Euclid School PTA's



PLEASE PRINT CLEARLY TO ENSURE YOU RECEIVE IMPORTANT & TIMELY COMMUNICATIONS

| TALENT: Please check all that apply | | |
|---|----------|----------------|
| ☐ Singing | ☐ Acting | ☐ Instrumental |
| □ Dance | ☐ Magic | □ Poetry |
| ☐ Martial Arts | □ Comedy | □ Other |
| Will you be performing with the aid of music?YesNo If so, please provide the following information: | | |
| Name of Song: | | |
| Artist/Band: | | |
| Digital Music File Name: | | |
| Digital Video File Name: | | |
| Number of people in act: (Please list all names below) | | |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |
| Student Name: | Grade: | Teacher: |
| Parent/Guardian Name: | Phone: | Email: |

□ My child would like to MC the event