## Request to Perform at

NDP Coffee House (H	igh school age to age 20) or	NDP Cocoa House (ages 8-13)
For Performance Date: Satu	ırday, February 25th, 2017	Application due February 18th, 2017_
*Performer Name:		Age
School (if enrolled)		
E-Mail Contact		Phone Contact
Parent name/contact if under ag	je 14:	
Description of Performance:		
	er 8 minutes unless the scene	sical number should be 3 to 5 minutes; as involves many characters—then try to
Each act must be screened for th	ne following elements:	
the material is suit	table for the target age group	o
the act is well-pre	pared/rehearsed	
the performer exh	ibits competent to exception	al skill
Screening approval can be done	in one of two ways. Choose	one:
(1) Have your theater/music	dance teacher review the e	ements above and sign and date review.
I	have reviewed	's act for the NDP
(reviewer name)		(performer's name)
Coffee/Cocoa House and	found it to be acceptable ba	sed on the screening criteria above.
Reviewer's Signature		(Date)
(2) Schedule an appointmen time below:	t for the NDP Review team to	screen you act. Request appointment
specify time r	equested on Saturday, 2/18,	between 10:00am and 2:00 PM:
Plan to be appointment.	at 912 Center Street in Cony	ers at least 10 minutes before
It is impossible f alternate time.	or me to schedule in the time	e allotted, please call me to set up an

After completing this form, please send to the following staff members by February 18<sup>th</sup>: For Coffee House, send to: Olivia Seckinger at <u>oliviadanielle98@gmail.com</u>

Copy Bonnie Marshall at bondan52@bellsouth.net

For Cocoa House, send to: Sherri Alderson at salderson2@gmail.com

Copy Bonnie Marshall at bondan52@bellsouth.net

\*Fill out form for each member of your group if it is a group act