

Johnson City District
Festival of Gifts and Talents Registration

10-24-10 @ Cherokee UMC

Church Name: _____

Adult Contact: _____

Email: _____ Phone _____

Group Name (if applicable): _____

Names and grades of participating youth: _____

Type of Gift/Talent: (Dance, Singing, Band, Drama, other):

How long is the talent offering? _____

Do you need use of a projector or screen? _____

Do you need microphones? If so, how many? _____

Do you need any special set-up? _____

Is there anything else you think we should know? _____
