



**KIDSZ GOT TALENT**  
**Registration Form**

Directions: Please download, complete information, scan and return via email to:  
ctg.jaida@gmail.com

Date: \_\_\_\_\_

Contestant: \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Description of Talent:

Other Special Interests:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*Thank You*

*The Creative Talent Group Team*