



Little Kicker

Karaoke Contest Application

Name of Applicant: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: (____) ____ - ____ E-mail: _____

Describe the entertainment you will be doing: _____

YES! Count me in, Ardell! I want to participate in the Little Kicker Karaoke Contest

Please check which age category you belong to:

- Preschool to 8 years old
- Age 9-13
- Age 14-17
- Age 18-20

This is an amateur competition. You are considered an amateur if you are not under a recording contract. All children must be accompanied by a parent or guardian and a parent's signature is required on this application. Kick'n Up Kountry, Inc. is not responsible for any injuries or problems occurring during the contests.

I have read and agreed to these terms.

Signed: _____ Date: _____

Relationship to applicant: _____

Parent/Guardian: Print out this application, sign and mail to:

Kick'n Up Kountry, Inc.
249 S. State Ave.
Lake Bronson, MN 56734

Please contact us if you prefer to have an application mailed to you.

www.kukmusic.com · Toll-Free Phone: 1-877-542-5687 · E-mail: kicknupkountry@wiktel.com