Gila River Royalty Presents: GILA RIVER'S GOT TALENT

CPA®



Friday, July 19, 2019 · 6:00 pm · Komatke Boys & Girls Club

Name of Talent Act:		* * *	X
Type of Performance:	* *	X * *	
Performer(s):	44	* * * *	
Age(s):			¥
Descriptions of Talent Act:	* *	* * *	Ac 2
	*	*	
Contact Information: Name:	*	* *	
Phone Number:		* Y Y	
Mailing Address: Email Address:			
GRIC Tribal # Distriction		le / Female: egal guardian.	
I hereby approve the participation of Gila River's Got Talent-Talent Show. I will not hold any of its agents, volunteers or other organization responsible for any damages to public or private p of above mentioned event. By signature below I g photograph any of the above named for the purp public.	ns involved in this Ta property done by th grant permission to t	zy, Gila River Indian Communit lent Show liable. I will also be e above-named during the en the Gila River Royalty to recore	tirety and
Signature of Participate if 18 years or older	Date		
Signature of Parent/Guardian if 17 years or less	Date	Contact of Parent/Guif 17 years or less	uardian
Email application to missgilariver@gric.r			

missgilariver@gric.nsn.us