



## INDIVIDUALS AUDITION FORM



Thank you for auditioning for the Bolton Talent Competition, supported by Backup North West. Please complete and return this form to: [stars@backup-charity.org.uk](mailto:stars@backup-charity.org.uk) to register your audition. Video files should be sent via a [WeTransfer link](#). Participants must be 14 or over. Further T&Cs can be found on the Backup website. Good luck!

**First Name\***

**Last Name\***

**Email Address\***

**Phone Number\***

I'd like to receive communications from Backup in future.

**Date of Birth\*** (DD/MM/YY)

**Type of Act\*** (singing, dancing, comedy, magic etc.)

**Name of Act** (if applicable)

**Audition Tape Link\*** (links should be generated through WeTransfer)

**Parent or Guardian Name** (under 18s only)

**Parent or Guardian Phone Number** (under 18s only)

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