

## Main Stage Performance Request Form

\_\_\_\_\_  
Name of performing group or individual

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Contact Person

Number of performers in your group? \_\_\_\_\_

Exhibitor @ Kids Expo? Yes or No

Circle preferred time to perform. Morning 9 to 12:00 or Afternoon 12:00 to 3:30?

Please give a brief description of your or your groups' performance.  
All performances must be approved prior to the day of the Kids Expo.

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All Groups Performing approved prior to August 22, 2009 will be listed in the  program .

Please mail request to:  
Central Texas Kids Expo  
Attention: Lynda Pohl  
PO Box 1062  
Belton, Texas 76513

or email [kidexpo@vvm.com](mailto:kidexpo@vvm.com)