



**SUMMER ARTS ACADEMY
PARENT – TEACHER - STUDENT NOMINATION FORM**



Nomination Window:

October 21, 2025 - November 21, 2025

Complete this QR code or fill out and return this form.



Student Nominated by: _____Parent _____Self _____Teacher

Student's Name: _____

Current Grade Level: _____ School's Name: _____

Parent/Guardian's Name: _____

Mailing Address: _____

Parent/Guardian Email: _____

Telephone () _____ Other Contact# () _____

Area of Interest: (Please check the ONE area)

_____ Visual Arts

_____ Dance

_____ Drama

_____ Vocal

_____ Instrument; which instrument? _____

PARENT/GUARDIAN'S SIGNATURE OF CONSENT FOR SON/DAUGHTER TO PARTICIPATE
IN THE AUDITION PROCESS

(PARENT/GUARDIAN SIGNATURE)

(DATE)