



First Sunday Arts Festival

Dance & Theatre Performance Application 2011

DANCE/THEATER PERFORMANCE APPLICATION

All applications must be accompanied by a completed stage setup diagram and a demo CD/DVD. NO CASSETTE TAPES PLEASE!

Note: applications are available to residents of Maryland, D.C. and Virginia

<u>CONTACT INFORMATION</u>	
Group Name:	_____
Contact Name:	_____
Street Address:	_____
City:	_____ State: _____ Zip: _____
Day Phone:	_____ Evening Phone: _____
Email Address:	_____

CHECK MOST APPROPRIATE BOX BELOW:	
<input type="checkbox"/>	TAP
<input type="checkbox"/>	BALLET
<input type="checkbox"/>	JAZZ
<input type="checkbox"/>	LYRICAL
<input type="checkbox"/>	FOLK
<input type="checkbox"/>	HIP HOP
<input type="checkbox"/>	MODERN
<input type="checkbox"/>	THEATER
<input type="checkbox"/>	OTHER

<u>PERFORMANCE INFORMATION</u>
Maximum number of performers on stage: _____
Have you performed at this festival in the last 3 years? <input type="checkbox"/> YES <input type="checkbox"/> NO
Does your group perform original music? <input type="checkbox"/> Entirely <input type="checkbox"/> Some <input type="checkbox"/> None
Describe your performance exactly as you would like it to appear in PR material: _____ _____

Mail to:
First Sunday Arts
586 Defense Hwy
Crownsville, MD
21032

<u>AVAILABILITY</u>
Please read carefully.
Please select any of the following time slots and dates that you would PREFER to perform. Note: Selecting one or more of these slots may increase the likelihood of your group getting a performance slot.
<input type="checkbox"/> 12noon - 1:30pm <input type="checkbox"/> 1:30 - 3:00pm <input type="checkbox"/> 3:00 - 4:45pm <input type="checkbox"/> May 1 <input type="checkbox"/> June 5 <input type="checkbox"/> July 3 <input type="checkbox"/> Aug. 7 <input type="checkbox"/> Sept. 4 <input type="checkbox"/> Oct. 2
Please indicate any times your group CAN NOT perform. _____ _____
Signature: _____ Date: _____