

40th ANNUAL FOLK MUSIC FESTIVAL

Sharlot Hall Museum

Name of band, ensemble, or act as it will appear in program

On the following lines, provide a brief description of the kind of music you perform, which will be used for promotion and in the program:

Thank you for your interest in the **40th Annual Folk Music Festival** at Sharlot Hall Museum in Prescott, Arizona. Please submit this application by **August 21, 2018**, to be considered for an invitation to perform. If you have not performed here previously, please provide a CD or link to your music on a website for review.

I am a solo act
 We are an ensemble act (2-3) We are a band (4 or more)

In completing the application, please enter only one band, ensemble or solo performer *per form*. If you are not a solo act, have only one person identified as the contact individual; all members of the band or ensemble should be listed on the form.

Contact individual

Contact telephone, including area code

Contact email address

Performance Availability:

Available to play during these times: (check all that apply)

<u>Saturday, October 6</u>	<u>Sunday, October 7</u>
<input type="checkbox"/> AM 10-12 Saturday	<input type="checkbox"/> AM 10-12 Sunday
<input type="checkbox"/> PM 12-2 Saturday	<input type="checkbox"/> PM 12-2 Sunday
<input type="checkbox"/> PM 2-4 Saturday	<input type="checkbox"/> PM 2-4 Sunday

Website address, if you have one

Please print member names of ensemble/band: *(one name per line)*

Preferred venue/stage at FMF: (indicate 1st and 2nd choice of venue)

<u>Indoor</u>	<u>Outdoor</u>
<input type="checkbox"/> Lawler Theater (60)	<input type="checkbox"/> Amphitheater (100) - west
<input type="checkbox"/> West Gallery (70)	<input type="checkbox"/> Gazebo (50)

Workshop Availability:

A key feature of the Folk Music Festival is the many workshop opportunities to share your knowledge and skill with others. Please indicate your desire to conduct or participate in the workshops, which may include:

Autoharp	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Dulcimer	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Banjo Styles	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Fingerstyle	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Guitar	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Songwriter's Circle	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Cowboy and Western Music	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead
Artist Self-Promotion	<input type="checkbox"/> Participate	<input type="checkbox"/> Lead

AUDIO / PHOTO / VIDEO RELEASE

The foregoing hereby grants Sharlot Hall Museum permission to use my/our likeness and/or performance in audio recording/photography/video without payment or any other compensation. Unless otherwise indicated I/we are 21 years of age and are competent to contract on my/our behalf. I have read this form before signing below, and I/we fully understand the contents, meaning, and impact of this release.

Please list what workshop you would prefer, if not listed above.

Performer Signature (or on behalf of ensemble, band) Date

If under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of

Stage Manager Availability:

In addition to performers, the Festival needs volunteers that can serve as Stage Managers, to assist in transitioning acts between sets, helping with setup and sound-checks, and making sure the Festival stays "on time" with performances. A two- or three-hour commitment would be great if you could help us and the other performing musicians. Please indicate here if you can assist in this role:

Yes, I will be a Stage Manager. No, thank you.

Performer name (please print)
and do hereby give my consent without reservation to the foregoing on behalf of this person.

Parent/Guardian Signature Date

Return this form by Aug. 21 to: Sharlot Hall Museum Folk Music Festival, Attn: Jenny Pederson, 415 W. Gurley Street, Prescott, AZ 86301 For additional information, phone (928) 445-3122 extension 5 or email: folkmusicfest@sharlot.org • www.sharlot.org

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USE THIS FORM FOR NON-SOLO PERFORMANCE GROUPS
 Please have each performer in your group complete and sign the one segment of the release portion of this form and **submit by Aug. 21** to: SHM Folk Music Festival, Attn: Jenny Pederson, 415 W. Gurley Street, Prescott, AZ 86301
 For information, phone (928) 445-3122 ext. 5 or email: folkmusicfest@sharlot.org
Make additional copies as needed.

AUDIO / PHOTO / VIDEO RELEASE - Person #4

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 Performer Signature (or on behalf of ensemble, band) Date

If under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of

 Performer name (please print)
 and do hereby give my consent without reservation to the foregoing on behalf of this person.

 Parent/Guardian Signature Date

AUDIO / PHOTO / VIDEO RELEASE - Person #5

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 Performer Signature (or on behalf of ensemble, band) Date

If under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of

 Performer name (please print)
 and do hereby give my consent without reservation to the foregoing on behalf of this person.

 Parent/Guardian Signature Date

AUDIO / PHOTO / VIDEO RELEASE - Person #2

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 Performer Signature (or on behalf of ensemble, band) Date

If under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of

 Performer name (please print)
 and do hereby give my consent without reservation to the foregoing on behalf of this person.

 Parent/Guardian Signature Date

AUDIO / PHOTO / VIDEO RELEASE - Person #3

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 Performer Signature (or on behalf of ensemble, band) Date

If under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of

 Performer name (please print)
 and do hereby give my consent without reservation to the foregoing on behalf of this person.

 Parent/Guardian Signature Date

AUDIO / PHOTO / VIDEO RELEASE - Person #6

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 Performer Signature (or on behalf of ensemble, band) Date

If under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of

 Performer name (please print)
 and do hereby give my consent without reservation to the foregoing on behalf of this person.

 Parent/Guardian Signature Date