

Entertainment Application
(please print)



• Contact Information

Name of group or performer

No. of members

Name of contact person

Address

Phone ()

E-mail

Fax ()

• Type of performance

Check all that apply:

- | | | |
|---------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Dance | <input type="checkbox"/> Vocal | <input type="checkbox"/> Instrumental |
| <input type="checkbox"/> Jazz | <input type="checkbox"/> Rock | <input type="checkbox"/> Ethnic |
| <input type="checkbox"/> Band | <input type="checkbox"/> Bluegrass | <input type="checkbox"/> Blues |
| <input type="checkbox"/> Oldies | <input type="checkbox"/> Gospel | <input type="checkbox"/> Country |
| <input type="checkbox"/> Folk | <input type="checkbox"/> Other: _____ | |

• Please describe your performance in detail:

• Scheduling

Please check your first, second and third preferences for performing time.

- | | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> Noon | <input type="checkbox"/> 1 p.m. | <input type="checkbox"/> 2 p.m. | <input type="checkbox"/> 3 p.m. | <input type="checkbox"/> 4 p.m. |
| <input type="checkbox"/> 5 p.m. | <input type="checkbox"/> 6 p.m. | <input type="checkbox"/> 7 p.m. | <input type="checkbox"/> 8 p.m. | <input type="checkbox"/> 9 p.m. |

Please indicate how long you would prefer to perform: _____

Note: We cannot guarantee that you will get the time slot or amount of performance time you requested; however, we will attempt to meet as close to your request as possible.

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• Stage set-up

Please make a drawing of stage set-up. Be clear and concise. Use symbol key for clarity. Draw and list type of instruments and mikes. Key: B=Boom S=Straight M=Music stand.

Front Stage

• Performers

List the names of your group members with instruments:

Performers: _____	Instruments: _____
_____	_____
_____	_____
_____	_____
_____	_____

• Introduction

Please provide a **brief** introduction that could be used by the emcee at your performance:

Once the entire application is completed, please return it to the address below.



**Entertainment Committee PO Box 9668 Yakima, WA 98909
P. (509) 577-7731 F. (509) 577-7766 rsalts@yakima-herald.com**