2023 ENTERTAINMENT APPLICATON (pg 1)

GROUP / BAND NAME:		
CONTACT NAME:		MOBILE #:
ADDRESS:		
EMAIL:		
WEBSITE:		
Have you performed at th If yes, which years / ti		al in the past? Y N m?
Type of Entertainment: Musical Artist (Solo) Musical Group/Band Comedy	DanceOther	
Prefered Time: Park (Saturday) Park (Sunday) 	Park (Saturday or Sunday)Downtown (Saturday Night)	
Number in group/band:		
 Amount of time available 15 Minutes 30 Minutes Other: 	□ 1 hour	
Performance Description: (No more than 100 words)		
-	-	ew? YN

2023 ENTERTAINMENT APPLICATON (pg 2)

Please include your booking fee requirements:

All submitted material becomes the property of the Spring Hill Fall Festival and will not be returned.

By agreeing to perform, the Artist/Performer acknowledges that there may be media, photographers, video and other documentation systems on the site and the Spring Hill Fall Festival cannot be held responsible for the use and re-use of any images taken. The Spring Hill Fall Fall Festival Committee reserves the right to use any and all images it controls for the future advertising and promotion, with no compensation to the Artist/Performer. By agreeing to this application, you are agreeing to these terms and this will be understood as your media consent/release form.

Signature:

Date Signed:

The Spring Hill Fall Festival will review all received applications. Due to the number of inquiries received please be advised we will only be in contact if we need additional information or if you have been approved as an entertainer for our event.

Any questions, please contact us at: SpringHillFF@gmail.com

TO SUBMIT YOUR APPLICATION, YOU CAN:

Mail both pages:

Spring Hill Fall Festival PO Box 502 Spring Hill, KS 66083

Drop Off both pages:

Farm Bureau 117 Main Street Spring Hill, KS 66083

Email: SpringHillFF@gmail.com