

ORILLIA CANADA DAY
“CELEBRATE ORILLIA” 2010
July 1st
Couchiching Beach Park

ENTERTAINMENT INFORMATION FORM

The Orillia Canada Day Committee is asking for your co-operation in completing this form. We will be using the information in advance publicity and promotion as well as by our Emcees in introducing you and/or your group.

Note: PLEASE COMPLETE WITH A BLACK PEN SO INFO CAN BE COPIED.

Name of Group/Performer: _____

Contact: _____

Address: _____

_____ **Postal Code:** _____

Telephone: _____ **Email Address:** _____

Information about you: (Type of music ie. Rock, jazz, folk, country; CD's, Upcoming bookings, awards, etc.) Use back of form if needed _____

Preferred Time and Location (to be confirmed): _____

Outline any special audio requirements: _____

Please complete the following IF you have insurance for special events:

Insurance Company: _____ **Policy #** _____

Address: _____ **Liability Limit:** _____

I agree to follow all Rules and Regulations as outlined by the Committee.

Name: _____ **Title:** _____

Signature: _____

Thank you for submitting your application by May 31, 2010.

