

# Metamora Country Days and Hot Air Balloon Festival



Saturday, August 24, 2019

## Stage Entertainment Application

Entertainment Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Day Evening

Type of Entertainment: \_\_\_\_\_

General description of entertainment \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List instruments: \_\_\_\_\_  
\_\_\_\_\_

Do you wear a costume? If yes, please describe costume: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Stage requirements: \_\_\_\_\_

Additional requirements: \_\_\_\_\_

Hours available: \_\_\_\_\_

Do you require a fee? If yes, please indicate fee: \_\_\_\_\_

Does your performance include audience participation? Yes No

I understand this participation application will be considered on the availability of space, the amount of space required and the number and type of entertainment applications received by others previously accepted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please include photo of entertainment and any additional information you wish.

Contact information: 2019 Festival Chairperson: Kellie Cimini email: [kelliecimini@gmail.com](mailto:kelliecimini@gmail.com)

**Please provide a copy of your insurance policy naming Metamora Area Chamber of Commerce as an additional insured on your general liability insurance policy and return with application **BY AUG. 2** to: **MACC, P.O. Box 16, Metamora, MI 48455.****