

Evendale Recreation Department—Band Application Bands that are interested in performing in any of our Special Events must fill out this application in its entirety. Incomplete applications will not be reviewed. This form is for informational purposes only and does not imply a contract between the band and the Village of Evendale. Your information will remain on file and will be reviewed periodically by an individual or individuals. Should your band be selected we will contact you for an interview. Thank you for your interest in our events. AFTER COMPLETING THE APPLICATION, YOU MUST SAVE IT ON YOUR COMPUTER PRIOR TO SUBMITTING. THANK YOU!

1. CONTACT INFORMATION Lead Contact Name: _____
2. Street Address: _____
3. City, State, Zip: _____
4. Phone Number with Area Code: _____
5. E-Mail Address: _____
6. Band Name: _____
7. Number of band members: _____
8. Music Style/Genre: _____
9. Length of time the band has been performing together: _____
10. Original, Cover or both? (if cover, give examples of artists/songs): _____
11. WHERE CAN WE HEAR YOUR MUSIC RIGHT NOW? Name of venue(s)—Please indicate indoors or outdoors: _____
12. DO YOU HAVE A WEBSITE? Please indicate: _____
13. DO YOU HAVE ANY DEMO VIDEOS OR AUDIO FILES THAT CAN BE ACCESSED THROUGH FACEBOOK, YOUTUBE, VIMEOS ETC.? Please indicate. _____
14. INFORMATION ON YOUR COMPENSATION NEEDS. The range of compensation in U.S. Dollars: _____ Variables in compensation (i.e. do you have various performance packages based on sound, travel, etc.): _____
_____ Options on performance sets (i.e. 2x45 minute sets, etc.): _____
15. When are you typically available? Please note daytime, evening, weekday, & weekend availability. _____
16. MERCHANDISE INFORMATION Type of merchandise to be sold: _____ Type of merchandise to be given away: _____ Type of merchandise to donate for a prize: _____

17. REFERENCES: Please provide TWO different references from the last 12 months. Name:

Title:

Company/Venue:

Street Address:

City, State, Zip:

Phone Number with Area Code:

E-Mail address:

Name:

Title:

Company/Venue:

Street Address:

City, State, Zip:

Phone Number with Area Code:

E-Mail address:

18. .TELL US ABOUT YOUR BAND Any information that will help us to know your band better: (150 words or less)

19. SUBMIT APPLICATION BY: Fax: 513-956-2680 Electronically: "Band Application" at
Allison.nasser@evendaleohio.org

U.S. Postal Service: Evendale Recreation Center Allison Nasser 10500 Reading Road Cincinnati, OH 45241