



Clau@solvangfestival.com 2125 village Ln Solvang CA 93463

Performer application 2017

Thank you for your interest in being one of our featured artists! We love performers that are innovative, encourage thought, and encourage participation on all Faeriefest Attendees. Please keep in mind that our festival is open to all ages, so content must be appropriate to all audiences. Be respectful of the community that is allowing us to host this event; profanity and nudity will not be tolerated.

Group/Artist name _____

Are you an: ensemble () Band () solo musician () performance artist () other/please specify ()

Website _____

Phone no. _____ Mailing address _____

Please list all performers:

_____	_____
_____	_____
_____	_____
_____	_____

If you need more space, please attach another page)

Please describe yourself as you'd like to be introduced/described in a program

A P.A. System will be provided for all performers to use, which will be monitored by a sound technician. Please let us know if you have specific needs for sound. (We strongly recommend you bring your own microphones)

Performance artists/dancers: You have the option of performing on the lawn, or our provided stage. Please describe any other needs you have. (All increased risks performances, included, but not limited to: aerial and fire performance must be approved by our staff AND fire dept, and will not be allowed without further written permission)

Dancers- Please bring your own music in a CD ready to play, AND an Ipod player in a playlist titled "Faeriefest 2017" Ready to play. You may also send in a copy of your music along with this application to ensure there are no sound issues.

Dressing rooms: There will be an area available for costume changes, but we will not be responsible for lost items.

Other requests:

I, _____, representing the aforementioned troupe and all of its members, agree to conduct myself in an orderly manner. I shall also hold Faeriefest, Solvang Festival Theater, The City of Solvang, and all of its representatives and staff, harmless from any injuries or losses that may happen associated with the participation of this event. I understand that engaging in rigging and fire performance are dangerous activities, and I participate at my own risk. I will abide by all instructions given by a stage manager, or festival organizers. I make myself responsible for any members of my group or ensemble that are under 18, and certify that I have their parent's or legal guardian's consent to participate in Solvang Faeriefest 2017.

Signature: _____ Date: _____

Received by: _____ Date: _____

Please mail in to: Solvang Faeriefest 2125 village Ln Solvang CA 93463, or email at clau@solvangfestival.com