



GRAND OPENING OF THE PEAK DISTRICT BOUNDARY WALK
Saturday 17th June, 10am-8pm
PERFORMER APPLICATION FORM

Name of individual, company or group:									
If company or group, main contact name:									
Email address:									
Postal address:									
Contact phone number(s):									
<p>I am/we are: (tick all that apply)</p> <table style="width:100%; border: none;"> <tr> <td style="width:50%;">Musician(s) <input type="checkbox"/></td> <td style="width:50%;">Story-Teller(s) <input type="checkbox"/></td> </tr> <tr> <td>Dancer(s) <input type="checkbox"/></td> <td>Poet(s) <input type="checkbox"/></td> </tr> <tr> <td>Gymnast(s) <input type="checkbox"/></td> <td>Actor(s) <input type="checkbox"/></td> </tr> <tr> <td>Comedian(s) <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> </table>	Musician(s) <input type="checkbox"/>	Story-Teller(s) <input type="checkbox"/>	Dancer(s) <input type="checkbox"/>	Poet(s) <input type="checkbox"/>	Gymnast(s) <input type="checkbox"/>	Actor(s) <input type="checkbox"/>	Comedian(s) <input type="checkbox"/>	Other <input type="checkbox"/>	<p>Brief description of what you want to do:</p>
Musician(s) <input type="checkbox"/>	Story-Teller(s) <input type="checkbox"/>								
Dancer(s) <input type="checkbox"/>	Poet(s) <input type="checkbox"/>								
Gymnast(s) <input type="checkbox"/>	Actor(s) <input type="checkbox"/>								
Comedian(s) <input type="checkbox"/>	Other <input type="checkbox"/>								
<p>Approximately how much space do you need?</p> <p>Do you need/use Amplification?</p> <p>What equipment will you need?</p> <p>.....</p> <p>.....</p> <p>Are you able to lend other performers any equipment? If yes please specify</p> <p>.....</p> <p>.....</p> <p>Please indicate any other requirements</p> <p>.....</p>									
<p>How long will your act be?</p> <p>In which time slots could you perform?</p> <p style="text-align: center;"> 10:00-12:00 <input type="checkbox"/> 12:30-15:00 <input type="checkbox"/> 15:00-18:00 <input type="checkbox"/> 18:30-20:00 <input type="checkbox"/> </p> <p>(please tick all that apply)</p>									

Return this completed form to: townteam@buxtontownteam.org and lilac14@talktalk.net
Or you can drop it into the Buxton Town Team mailbox by Reception in Buxton Town Hall during working hours, or post it to Buxton Town Team, 22 West Road, Buxton SK17 6HF
Any queries, please email: lilac14@talktalk.net

Closing Date Friday 2nd June

