



# Kalari-Lachlan River Arts Festival

Forbes, NSW 29 - 31 October 2015

See [www.riverartsfestival.org.au](http://www.riverartsfestival.org.au) for more information  
Contact: [riverartssecretary@yahoo.com](mailto:riverartssecretary@yahoo.com), or Annabelle on 0437 166 708

## PERFORMERS REGISTRATION FORM

You are warmly invited to perform at the River Arts Festival in Forbes on 29 - 31 October 2015. Please complete details as requested below. Be sure to sign the consent form at the bottom of the page.

Email your completed form as an attachment to [riverartssecretary@yahoo.com](mailto:riverartssecretary@yahoo.com), or snailmail to Festival Registrations, PO Box 888, Forbes, NSW 2871, or drop it in to Splash Gallery, Templar Street, Forbes.

Your name in full \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
Landline Tel. \_\_\_\_\_ Mobile \_\_\_\_\_  
Email \_\_\_\_\_ Web site \_\_\_\_\_

### ABOUT YOUR PERFORMANCE (Groups are fine)

What style or genre is your performance? [classical, country, rock, jazz, hip-hop, pop, bush poetry, gospel, etc]

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#### Type of performance

Singing: YES NO (Please circle yes or no)

Recitation (poetry, comedy etc): YES NO

Busking Only: YES NO

On stage performance (if possible): YES NO

Musical Instrument/s: YES NO

What is your Instrument/s \_\_\_\_\_

Do you require accompaniment?(e.g. band): YES NO

Do you require a powered site? YES NO

What is your target audience? GENERAL ....ADULTS CHILDREN

Other relevant information \_\_\_\_\_

### CONSENT FORM

Your consent, or your parent/guardian's consent if you are younger than eighteen, is required because your performance/s may be video-taped, photographed or otherwise recorded, and these recordings, including photographs, may be used for publication and promotional purposes in different media. All performers are required to sign a consent form.

***I, the undersigned, have read the above and agree to allow my, or my child's performance, to be photographed or videoed or otherwise recorded, and for such recordings to be used in future publications or promotions in any media.***

Artist's signature \_\_\_\_\_

Parent or Guardian's signature \_\_\_\_\_

Date \_\_\_\_\_ Name in full (print) \_\_\_\_\_

Contact details \_\_\_\_\_

[NB If you submit this form by email, you need to scan the signed consent form first, and then send the scanned version.]

**We look forward to enjoying your performance at the River Arts Festival.**