

## Fruit Loopz Youth Stage 2010: Submission Form for Artists/Performers

Please print out this page and fill it out-then, along with any other supporting material, send it to or drop it off at:

**SOY, Sherbourne Health Centre  
333 Sherbourne Street  
Toronto, ON M5A 2S5**

If you have any questions, contact Bernice at [bchau@sherbourne.on.ca](mailto:bchau@sherbourne.on.ca) or **416-324-4100 x5312**

*\*\*Fruit Loopz actively encourages submissions from trans youth, racialized youth, and youth from outside Toronto.\*\**

**NAME OF ARTIST/GROUP:  
AGE OF MEMBER(S):  
CONTACT PERSON:**

**ARE YOU A RETURNING PERFORMER?  
WHICH YEARS DID YOU PERFORM?**

**PHONE:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**SUBMISSIONS ARE DUE BACK BY MAIL OR EMAIL BY FRIDAY, APRIL 9<sup>th</sup>, 2010**

**TYPE OF PERFORMANCE:**

- |  |   |
|--|---|
| <input type="checkbox"/> Spoken Word/Poetry/Monologue  | <input type="checkbox"/> Other Drama                        |
| <input type="checkbox"/> Dance                         | <input type="checkbox"/> Musical Band: Type of Music: _____ |
| <input type="checkbox"/> Performance Art               | <input type="checkbox"/> Music Solo: Type of Music: _____   |
| <input type="checkbox"/> Drag (lipsynch)               | <input type="checkbox"/> Drag (Singing)                     |
| <input type="checkbox"/> Other (please specify): _____ |   |

**In order for us to program you into an appropriate section of the show, please rate the loudness of your performance on the following scale of 1-5:**

1	2	3	4	5
(no sound)	(quiet: spoken word)			(loud: rock/punk band)

**Length of Performance:** \_\_\_\_\_ minutes

**Do you have a specific performance time request?**

early afternoon(1pm-4pm)  late afternoon (4pm-7pm)  evening (7pm-10pm)

**Is there anything we can do to make your experience with Fruit Loopz more accessible?**

Detailed Description of Performance (include props, etc.; if necessary use another sheet of paper)\*\*:

**\*\*IMPORTANT:** *Submit all lyrics and poetry with this application form. Our ASL interpreters need all materials in advance to be able to do their translations. If selected, you will be asked to sign a contract confirming that you will present the performance as described here.*

*Please include details regarding special effect/materials you may be using (e.g. powder, confetti, bright flashes, etc). Our stage managers need to know what you will be working with in order to best support you and keep the stage and area safe for all other performers.*

*Note: Please include with your submission form any supporting material, e.g. CDs, photos, audio/video tapes that would help the Fruit Loopz in its decision-making process.*

Technical Requirements (equipment Fruit Loopz can provide for your performance, e.g., microphones, amps, drum kit, etc):

Supporting Materials (equipment you will provide for your performance, e.g., CDs, instruments, audio/video tapes, etc.):

Performers Bio: (Please provide a 50-word bio that we can use in Fruit Loopz Youth Stage program. Attach an additional sheet if necessary.) **YOU MUST SEND YOUR BIO WITH YOUR SUBMISSION!**

**Waiver:**

Do you give Fruit Loopz permission to print or advertise your name? Yes | No

Do you give Fruit Loopz permission to use photos or images of you for publicity purposes? Yes | No

**Contact Person (please print):**

**Phone number (where we can reach you during the day):**

**Signature:**

**Date:**