

Fruit Loopz Youth Stage 2008: Submission form for Artists

Please print out this page and fill it out-then, along with any other supporting material,

send it to: king_lorelei@yahoo.ca

or drop it off at:

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

416-324-5083

Fruit Loopz actively encourages submissions from Trans youth, youth of diverse ethno-cultural backgrounds, and youth from outside Toronto.

NAME OF ARTIST/GROUP

AGE OF MEMBER (S):

CONTACT PERSON:

ADDRESS:

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

PHONE: _____ **FAX:** _____ **E-MAIL:** _____

SUBMISSIONS MUST BE RECEIVED NO LATER THAN TUESDAY, MARCH 31st, 2009

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(2-4pm) late afternoon(4-6pm) evening (6-10pm)

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

*****IMPORTANT: If selected, you will be asked to sign a contract confirming that you will present the performance as described in this submission.***

Please include details regarding special effect/materials you may be using (eg 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. Thank you!

Note: Please include with your submission form any supporting material, e.g., CDs, photos, audio/video tapes that would help the Fruit Loopz Program Committee 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., CD's, 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: