Stage Performer Application - 2021											
Group Details											
Name of Community Group:											
ABN:			Are you N	re you Non-Profit Organisation?					Yes:		No:
Contact Po	erson Detai	il:	Name:	Name:					Title:		
Address:											
						Post code					
Phone:				Мо	bile:		•				
E-Mail:				Fax	x:						
Individual Artist/Entertainer Details											
Name:											
Detail:	Music:	rts:	Own Insurance:				Yes:	No:			
Contact Po	erson Detai	il:	Name:						Title:		
Address:											
									Post code		
Phone:						lobile:					
E-Mail:					Fax	(:					
Bank Account Name for your Performer Payment: (Note: All payments will be made by mail/cheque)											
About your Performance											
Please des											
Previous Experience/Awards.											
Stage Requirements (to be provided by Event Organisers)											
Tick	Туре			QTY							
	CD Player					Note: Backing tracks to be submitted in electronic format					
	Microphone					to Stage Manager fourteen days prior to the event date.					
	Chair										
	Table										
	Special items provided at cost										
Performance Conditions & Performer Payments											
For details see 'Conditions for Performers'.							Do	wnload	dable from	the GCM Fe	stival website
Declaration:											
I confirm that the details I have provided above are correct, and agree to abide by all conditions set by QCEA Inc.											
Authorised Person:											
Signature											
Date:											

GCMF 2021 Performer Applications will be taken on a first come, first served basis, so apply early!