MUSICAL ENTERTAINMENT APPLICATION

Date Application was Submitted for review:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Band Name: |  |
| Type of Music Played: |  |
| Contact Person: |  |
| Phone Number: | ( ) |
| Email address: |  |
| How Long have you been singing/a band: |  |
| What other events have you played at: |  |
| Do you have a u-tube clip or web site we can listen to your music? |  |

Submit the form via…

Email: womens\_night\_out@yahoo.com

(or)

Mail: Entertainment Review P.O. Box 1774 Lewiston, ID. 83501

Thank you for your interest in playing at the Christmas extravaganza, we look forward to reviewing your application and will be in touch via phone or email upon receipt.