

2017 MUSKEGON BIKE TIME PERFORMING ARTIST APPLICATION



Name of Performer/Ensemble _____

Contact person _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail: _____

Alternate contact person _____ Phone _____

Which ONE category best describes your act ? (please check)

- ALTERNATIVE BLUES CLASSICAL COUNTRY FOLK/BLUEGRASS GOSPEL HIP-HOP JAZZ
POP R&B RAP REGGAE ROCK SWING/BIG BAND OTHER _____

Number of years/months act has been performing: _____ Number of band members: _____

Instruments played: _____

Number of PA inputs required: _____ Fee requested (required): _____

Dates and times available (Festival dates are July 13 – July 16) _____

References (include name, venue and phone number):

1. _____
2. _____
3. _____

Upcoming performances (location, date & time):

1. _____
2. _____
3. _____

Please include any tapes, pictures, biographies, CDs, or videos that you would like to include as part of the consideration of your act. Any of this material is helpful, but a biography is required.

Please remit to: Muskegon Bike Time
Band Application
149 Shoreline Drive
Muskegon, MI 49440

PLEASE DO NOT CALL
THE OFFICE FOR STATUS