

Australian National Busking Championships $^{\mathsf{m}}$

Cooma NSW - (Regional Competition & National Grand Final) Saturday 5th November 2016



Proudly Presented by The Rotary Club of Cooma

ENTRY FORM

(Please complete a separate entry form for each performer)

Name:		Age Category? I	Primary* (Please tick approp		Open
(* Primary relates to primary school aged children. Secondary In the case of a group, the Age Category is decided by the age			accompanist)		
Consent of Parent or Guardian (needed for	children under 16 years of ag	e):			
I consent to have my child perform in the 201	6 Australian National Busking	g Championships TM - Coo	ma NSW (AN	BC Cooma).	
I also consent to allow images and/or video of our official website and/or Facebook page. I a guardian during this event.					
Signed	(Print Parent/Guardian's Name)				
Postal Address:					
Phone: Mobile: (Please tick appropriate box)	Ema	ail: (It's essential that you provi	ride an email addres	ss so you can receive a cop	y of the timetable)
Will you be competing for the prizes?	·	led Minimum 4 x 30 Minute	ŕ	•	
When will you be available to perform?	☐ All day - or ☐ On	ly during these times			•
How many sets would you like to perform					
Will you be performing solo? - or i	in a group? (2 or more)	(To avoid confusion you m	nust choose on	e or the other)	
If you're in a group, what is its name? (Please complete a separate entry form for each mem.	ber of your group)				
How would you best describe your perf					
Have you got any of your performances	s online?				
Will you be using any amplification?	□NO □YES (details ple	ase)			
Do you have any other special requiren	nents?				
Terms and Conditions:					
All performers must be registered and have the As this event is family friendly the organizers re Volume levels must conform to any direction g Performers who wish to be eligible for prizes m Any images or video taken during this event ma All the decisions of the judges are final and no I agree to these terms and conditions and I will comply with	eserve the right to exclude any perforn given by the event organizers or official nust be available to perform in the Fina ay be used by the event organizers for correspondence will be entered into.	ls. Repeat offenders may be disqu als Concert at 5pm on Saturday 5 th future promotions.	ualified from the o	competition.	
Signed	Dated				
Entry Fee: \$20 for each partic	cipant. Maximum fee of	\$50 per group	(Pleas	se include payment w	vith this form)
All fees will be paid to the Rotary Club of Coor	ma				
Please make Cheques payable to the <i>Rotary C</i>	Club of Cooma Inc. ANBC Co	oma Busking			
All fees will be gladly accepted at Cooma School	ol of Music on behalf of the Ro	tary Club of Cooma			

Please return this form to: Cooma School of Music,

Please email receipt of your Direct Deposit to: <u>allan@coomamusic.com.au</u> - Include your name and "Busking" in the description.

Cash / Cheque / or Direct Deposit* to Rotary Club of Cooma Inc. BSB: 062 523 Account No: 10243818

Shop 2 Parkview Arcade 123 Sharp Street, Cooma NSW 2630 Ph: (02) 6452 6067 Fax: (02) 6452 4938 Email: allan@coomamusic.com.au

CLOSING DATE FOR ENTRIES SATURDAY 29th October 2016

