

Italian Idol
2017 Registration Form
Please print all information

Group/Performer Name: _____

Contact Name: _____

Contact Phone: _____ **Type #:** _____

Alternate Phone : _____ **Type #:** _____

Contact email address: _____

Description of act (please check one):

____ Singer(s) ____ Instrumentalist(s) ____ Band ____ Dancer(s)

____ Other (describe): _____

Name of piece performing: _____

Technical Requirements (check all that apply):

____ I will provide recorded accompaniment

____ I will be playing an instrument I will bring

____ I need a keyboard

____ I need a microphone—how many?: _____

____ Other (describe): _____

Bio information:

If you have not performed with us in the past, please give a brief history of you or your group including your age, any interesting facts about yourself, past event performances or any awards you have received. Please use the back of this sheet to provide this information.