



**SPRING
ARTS
BAZAAR**

Saturday, June 11th 2011 10am-4pm

Entertainment Form

Band/Group/Organization Name: _____

Contact Name: _____

Phone: _____ Fax: _____ Email: _____

Type of Entertainment: _____

Will you be selling CDs, stickers or any other merchandise? Yes No

Please describe: _____

Signature: _____ Date: _____

Please select your three preferred time slots:

- 10:00 am – 10:45 am
- 11:00 am – 11:45 am
- 12:00 pm – 12:45 pm
- 1:00 pm – 1:45 pm
- 2:00 pm – 2:45 pm
- 3:00 pm – 3:45 pm

The Community Arts Council requests at least 48 hours cancellation notice.

Thank you for your application.