

*Folk Federation of South Australia*

**ARTIST REGISTRATION FORM**

Name of Artist /Group : .....

Contact Person : .....

Phone (W) : ..... Phone (H) : .....

Fax : ..... Mobile : .....

Email : ..... No. of Artists in Group : .....

Mailing Address : .....

.....

.....

Brief Description of Group & Musical Style : .....

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Usual Performance Fee : .....

Technical Requirements : .....

*(please attach stage plan if appropriate)*

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*I/We understand that this information will be registered on a public database for use by the Folk Federation & other interested parties.*

Signed by : ..... Date : .....

*When complete please return this form to :*

*Folk Federation of South Australia.*

*PO Box 525 Adelaide. South Australia. 5001.*

Please enclose any Demo's. Bio's &/or Photo's which may assist us in promoting you.