

Crookwell Country Weekend BUSKING COMPETITION (CCWBC)

Application

Before applying please read CCWBC Terms & Conditions

| Applicant Details | |
|---|---|
| Act Name: | |
| Mailing Address: | |
| Performers Name(s): | |
| Phone - Home: | Mobile: |
| Email Address: | |
| Age of Performer(s): | |
| Musical Style Briefly describe the style | of music you play. |
| Performance Requi | rements |
| Do you require electricity | Yes No No.of outlets |
| Sales Briefly describe any musi | c products you will be selling. |
| Insurance | |
| If you have personal insu | rance, please provide the details below. |
| Cost \$20 per person, \$40 for a entrants to arrange paym | a duo, \$50.00 per group of 3 or more people. Council will make contact with accepted ent. |
| Total | |
| Please return your app | lication to events@upperlachlan.nsw.gov.au no later than 1st March 2023. |

I have read and agree to comply with CCWBC Terms & Conditions.

