



2010 Performer Application

Name(s) of Performer(s): _____

Name of Contact Person: _____

Address: _____

Day Phone: _____ Evening Phone: _____

Emails: _____ Website: _____

May we put a link to your site on the ABFM website? Yes No

Group/Act Name: _____

Type of Performance: _____

Please indicate on which date(s) you are available for market day — Sundays from July 11 through October 31, 2010 (please identify first, second, and third choices). Also, please note which time slot(s) you prefer.

- First choice _____ 11:15am–12:00 noon 12:15–1:00pm 11:15–1:00pm (with break)
- Second choice _____ 11:15am–12:00 noon 12:15–1:00pm 11:15–1:00pm (with break)
- Third choice _____ 11:15am–12:00 noon 12:15–1:00pm 11:15–1:00pm (with break)

Please write a **brief** description of your performance and performers for ABFM publicity use (continue on back if necessary):

I/we acknowledge that I/we have read the Performer/Entertainment Rules and Regulations and will comply with them.

Name of Applicant: _____ Date of Application: _____

Signature of Applicant: _____

Questions? Please contact the Performer Coordinator at music@ABFarmersMarket.org or at 978-635-9664.

Please mail or fax this completed application to:

AB Farmers Market, 109 Concord Road, Acton, MA 01720 • Fax 978.635.5499

AND

Please mail or email audio or video samples to:

AB Farmers Market, 109 Concord Road, Acton, MA 01720 • music@ABFarmersMarket.org

(Email the Coordinator at music@ABFarmersMarket.org to make arrangements for uploading larger audio or video files.)

Thank you!