

NORTH FLORIDA FAIR COMMUNITY STAGE

November 2 – 5 and November 10 – 12, 2017

BOOKING DATE: _____ INTERESTED IN 2ND SHOW IF AVAILABLE: _____

CONTACT PERSON: _____ PHONE NUMBER: DAY _____ EVENING _____

NAME TO APPEAR ON STAGE SIGN: _____

COMPLETE MAILING ADDRESS: _____

STREET ADDRESS

CITY

STATE

ZIP

TYPE OF PERFORMANCE: _____ NUMBER OF PERFORMERS IN GROUP: _____

ANY SPECIAL NEEDS OR REQUESTS:

THE NORTH FLORIDA FAIR WILL DO IT'S VERY BEST TO MEET ALL SPECIAL NEEDS AND REQUESTS, BUT MAKES NO GUARANTEE EXCEPT WHERE REQUIRED BY LAW. TWO MICROPHONES AND A BASIC SOUND SYSTEM WILL BE SUPPLIED BY THE FAIR, ANY ADDITIONAL EQUIPMENT TO BE SUPPLIED BY PERFORMER (S).

****NOTE: IF YOUR GROUP HAS 10 OR MORE PERFORMERS, PLEASE LIST THE NAMES OF EACH PERFORMER ON A SEPARATE SHEET OF PAPER AND RETURN WITH THIS FORM TO THE NORTH FLORIDA FAIR. THIS LIST IS REQUIRED BEFORE ANY ENTRANCE CREDENTIALS WILL BE ISSUED.**

For Office Use Only:

Day _____

Time _____

Day _____

Time _____

Confirmation Letter Mailed: _____

Reminder Letter Mailed: _____

Performer Passes: How Many: _____

Numbers: _____

Date Passes Picked Up: _____ Time: _____

Issued by: _____

Passes Picked Up by: (please print) _____

Signature: _____

Please complete this form and submit via fax or mail: attention to Stella Earnhart



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