

LIEUTENANT GOVERNOR'S LOUISIANA MUSIC AMBASSADOR PROJECT EVENT APPLICATION FORM

Name of the Artist / Band / Performer:			
Name of the Event:			
Date(s) of the Event:			
Date(s) / Time(s) Artist / Band is contracted to perf	form:		
Specific venue (stage name):			
Musical genre the Artist/Band is contracted to perf	form:		
Where is the event held? City:	State:	Country:	
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Attendance at event last year: Expected attendance this year:			
Event website:			
Artist / Band website:			
Is this the first time Artist / Band will appear at this event? YES NO If no, how many times has the Artist / Band appeared at this event?			
Person filling out this form (Name and Title):			
Phone number:			
Email address:			
Physical address:			
Contact from festival / event (Name and Title):			
Phone number:			
Email address:			
Physical address:			

Please provide a copy of the signature page proving Artist / Band / Performer is contracted to perform in the above event. Performance fee may be redacted.