

Artists' Garden Cooperative, 345 Balliol St., Toronto, ON. M4S 1E
FAX 416 487 2917 Email: admin@artistsgardencoop.com

Concert Proposal

JULY & AUGUST 2009

Plein Air Concerts

PROPOSAL / AGREEMENT FORM

Please complete the form and sign the attached agreement below.

Please clearly print or type your response and FAX and/or MAIL it with a brief bio. and sound sample.

DEADLINE FOR RESPONSE IS April 20, 2009.

Incomplete proposals will not be considered.

CONCERT PROPOSAL

Name of group or individual Performer(s);

Postal Address: _____

City _____ Province/State _____ Postal Code _____

Phone: _____ Fax _____ Email _____

Acoustic Music Style (e.g. Classical, Folk, Global, Jazz)

Preferred Performance Dates:

Check 2 or more possible dates from the list below.

You will receive confirmation of booking in early May.

WEDNESDAY EVENING CONCERTS time **7:30 pm to 9:00 pm**

Wed. July 1

Wed. July 8

Wed. July 15

Wed. July 22

Wed. July 29

Wed. Aug. 5

Wed. Aug. 12

Wed. Aug. 19

Wed. Aug. 26

Please indicate willingness to participate

-Promotion/Marketing:

I/we will provide a mailing list

I/we will distribute concert flyers

I/we are willing to donate a short (10 min.) performance at a project launch in June

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PERFORMER AGREEMENT

Please read carefully and complete the following application agreement in order to qualify for inclusion in the Plein Air concert program. Keep a copy for reference. Return a signed copy by FAX or postal Mail with the proposal form.

TERMS AND CONDITIONS: Plein Air Garden Concerts

I/we _____ (performer's/group name) Agree to perform in the "Plein Air" Garden concert series program, 2009 under the following conditions:

1. I/we will honour concert dates, times and descriptions published in program publications (based on confirmation and consultation with the Project Manager).
2. I/we will accept an honorarium as compensation or fee equal to no less than 40% and no more than 70% of the "gate" on the performance date.
3. I/we understand that all ticket sales for "Plein Air" concerts will be administered by the Project Manager.
4. I/we understand that I/we will be requested to release the use of photo and text documentation of my/our performance for promotional purposes.
5. I/we understand that I/we agree to an outdoor concert performance "rain or shine."
6. I/we release the "Plein Air" Garden concert series program, the Artists' Garden Cooperative and the Committee for Visual Education from any responsibility for lost or damaged equipment during my/our participation in the "Plein Air" Garden concert program.

Dated: _____

Performer's/Group's Authorized Signature(s):

