

**2010 INTERNATIONAL VSA *arts* FESTIVAL**  
**APPLICATION FORM FOR PERFORMING ARTISTS**

**DEADLINE: AUGUST 3, 2009**

PLEASE TYPE OR PRINT IN ENGLISH

**ARTIST/GROUP (Applicant):**     Individual     Group

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FIRST NAME/GROUP NAME

(as you would like it to appear in publicity materials)

LAST/FAMILY NAME

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GROUP LEADER (if applicable)

TITLE

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TOTAL NUMBER OF INDIVIDUALS IN GROUP

NUMBER WITH DISABILITIES

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TYPE OF DISABILITY(IES) (for eligibility purposes only)

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MAILING ADDRESS: STREET

UNIT NUMBER

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CITY

STATE

COUNTRY

ZIP/POSTAL CODE

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TELEPHONE

(area or country code + number)

FAX

CELL/MOBILE

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E-MAIL ADDRESS

WEB SITE

Check the category that best describes you or your group (for judging purposes only):

- Children (ages 5-12)       Young adult (ages 13-21)       Adult (ages 22 and above)

Check the ONE\* category that best describes the work you are submitting:

\*If you are submitting different categories of work (i.e. you are a comedian and a dancer), a separate application is required for each category. Photocopies of this application may be used.

- Comedy       Dance (specify type: \_\_\_\_\_)  
 Opera       Music (specify type: \_\_\_\_\_)  
 Storytelling       Theater (specify type: \_\_\_\_\_)  
 Puppetry       Variety (vaudeville, acrobatics, clowns, mime, juggling, etc.)

This performance is appropriate for:

- Children     Adults     Both

**Check below if you are willing to demonstrate:**

- Demonstrations for adults     Demonstrations for children

**Check here if you are willing to teach a performing arts workshop**

Artists must submit a recording of their performance with this application. Please see the application guidelines on [www.vsarts.org/CallforPerformers](http://www.vsarts.org/CallforPerformers) for further instructions. Indicate below the type of recording provided:

- CD       DVD       Audio tape       VHS

Please list the recorded selections below in order of the recording:

1. TITLE: \_\_\_\_\_

DURATION: \_\_\_\_\_

2. TITLE: \_\_\_\_\_

DURATION: \_\_\_\_\_

3. TITLE: \_\_\_\_\_

DURATION: \_\_\_\_\_

## RELEASE

By submitting an application, the performing artist agrees with the terms and conditions for the call, adjudication, and resulting performance. The artist grants permission to photograph the performance at the Festival, and publish the artist's biography including mention of disability, description of work, and artist's photograph for promotional and educational purposes, including broadcast, print, electronic media, and the Internet. The artist understands that all application materials will become the property of *VSA arts*.

Primary Contact's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### IF CONTACT IS UNDER AGE 18, PLEASE COMPLETE THE FOLLOWING FIELDS:

Name of Parent/Guardian of Primary Contact: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_  
(area or country code + number)

Parent/Guardian Email: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

All applicants should submit their application form, artist statement, vitae/resume, photographs, and recording **to be received by August 3, 2009**.

#### **VSA arts Call for Performers**

818 Connecticut Avenue, NW, Suite 600

Washington, D.C. 20006

202-628-2800 (voice)

1-800-933-8721 (toll free voice)

202-737-0645 (TTY)

202-429-0868 (fax)

[EFKey@vsarts.org](mailto:EFKey@vsarts.org) (e-mail)

[www.vsarts.org](http://www.vsarts.org) (Web site)