

# CHARLEVILLE PERFORMING ARTS FESTIVAL 2023



## Group/Ensemble Nomination Form – 3 or more performers

### FINAL SUBMISSION DATES:

**NOMINATION FORMS AND FEES**

**MONDAY 17<sup>TH</sup> JULY (T3, Wk2)**

**RECORDED BACKING MUSIC (IF NOT USING ACCOMPANIST)**

**FRIDAY 11<sup>TH</sup> AUGUST (T3, Wk6)**

**PRE-RECORDED ENTRIES**

**MONDAY 14<sup>TH</sup> AUGUST (T3, Wk7)**

\*Submissions after these dates will not be accepted. Late withdrawals will not be reflected in the Program.

\* Separate Entry Forms must be submitted for Duet and Group/Ensemble nominations.

NAME OF GROUP/ENSEMBLE:		AGE OF OLDEST MEMBER:		ADULT: <input type="checkbox"/>
CONTACT NAME:		CONTACT NUMBER:		
EMAIL ADDRESS:		SCHOOL NAME:		

### ENTRY FEE - \$15.00 PER ITEM

*Nomination fees must be paid in full upon submission of forms.*

*NOTE: Items may be divided depending on numbers and types of nominations received, eg. according to age/instrument/genre etc.*

ITEM NUMBER	NAME OF ITEM	PRE-RECORDED PERFORMANCE?	NUMBER OF PERFORMERS IN EACH ITEM	FEES \$15.00/Item
<i>e.g. 10</i>	<i>e.g. Small Ensemble Open</i>	<input type="checkbox"/>	<i>e.g. 4</i>	<i>e.g. 15.00</i>
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
				<b>Total Item Fees</b> \$
<b>Donations are gratefully accepted</b> Would you like your name/s included in the Donations List? Yes <input type="checkbox"/> No <input type="checkbox"/> Name: _____				Donation \$
<b>EFT Payment Reference (Entrant's name):</b> _____				<b>Total payment</b> \$

### PLEASE RETURN PAYMENT AND FORM IN A SEALED ENVELOPE TO:

Attn: Treasurer, Charleville Performing Arts Assoc Inc

<b>By Post:</b>	<b>Deliver to:</b>
PO Box 13, Charleville QLD 4470	Wilkinson's Jewellers, Alfred St, Charleville

### PAYMENT METHODS ( SELECTED OPTION):

<input type="checkbox"/> <b>Electronic Funds Transfer (EFT)</b> Charleville Performing Arts Assoc BSB: 084-500 ACCOUNT: 98 325 4270 REFERENCE: Entrant's name EMAIL RECEIPT TO: <a href="mailto:treasurercpaa@gmail.com">treasurercpaa@gmail.com</a>	<input type="checkbox"/> <b>Cheque/Money Order</b> TO: Charleville Performing Arts Assoc Inc	<input type="checkbox"/> <b>Cash</b> No change given
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### AGREEMENT & MEDIA PERMISSIONS

#### Read carefully and sign:

- I have read and hereby agree to abide by the 2023 Schedule, Notes and Conditions Document.
- I wish to **OPT-OUT of recording/photography** for the above performances. i.e. **I DO NOT give permission** for Charleville Performing Arts Assoc Inc to **publish images or recordings** of my performance/s on Social Media or the Internet.

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

**ENQUIRIES:** [charlevilleperformingarts@gmail.com](mailto:charlevilleperformingarts@gmail.com)