



2010 Battle of the Bands

Date: January 30th 2009

Time: 5pm-11pm

Place: The Den, located at the Maple Valley Community Center

Admission: \$5 per person

Contest Entry Fee: \$30 per band

Eligibility: The majority of band members must be under 20 years of age.

Tech Specifications: The Den uses a Mackie Onyx 24.4 mixer into EAW mains and subs. The Den will provide a sound engineer for the event. Any specific sound requests must be submitted to The Den at least seven (7) days prior to show date.

Band Application due January 15th

(Please note that each individual band member must also complete and sign the performer contract, and have their parents sign if they are under 18.)

Name of Band:	
Contact Person:	
Phone:	Email:
Band Members:	
Description of Style:	
Sound System Requests:	
Song Playlist for 20 minute set*:	

**This is an all ages event. When choosing songs please remember to respect the audiences you will be playing for. It is not our intention to censor your music; we simply want to be considerate and keep Battle of the Bands open to everyone.*

What would you like us to say about your group in an introduction?



PERFORMER REGISTRATION AND CONTRACT

Participant Name		Today's Date		Home Phone		E-mail Address		
Street Address			Mailing Address (if different)			City/ST		Zip
School	Date of Birth		Male <input type="checkbox"/>	Female <input type="checkbox"/>	Language other than English?		Does participant have a disability? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Allergies		Special needs & additional comments						
Physicians Name		Phone Number	Insurance Company		Subscriber Name & Medical Number			
Parents Name(s)		Address (if different than above)			Home Phone		Cell Phone	
1. _____		1. _____			1. _____		1. _____	
2. _____		2. _____			2. _____		2. _____	
Emergency contact if parents cannot be reached		Home Phone			Cell or work			
1. _____		1. _____			1. _____			
2. _____		2. _____			2. _____			

Injury/Illness Procedure

If a participant is injured, appropriate first aid will be given, and 911 called as necessary. A parent/guardian will be notified as soon as possible. Authorization for emergency medical treatment must be signed prior to program participation. If a participant becomes ill, parent/guardians will be contacted to pick up youth as soon as possible.

Liability

The performer assumes responsibility for any damages or loss of equipment at The Den, as well as any damages caused to The Den's facility and equipment. While The Den provides volunteer security and does our best to keep performer's equipment safe, The Den is not liable for any such damages or theft.

Participant Safety

Because of concerns regarding damage to The Den facilities and equipment, as well as concern for the safety of crowd members, The Den cannot allow stage diving, crowd surfing, or aggressive dancing. Audience members taking part in any of these activities will be asked to stop and may be removed from the venue without re-entry. Furthermore, performers found encouraging these activities will be considered in breach of contract and may be required to leave the The Den facility immediately.

Agreement of Mutual Respect

GMVCC is a place where everyone can feel safe and respected. To achieve this, program participants will agree to the following:

- Treat others with respect, and respect the authority of paid and volunteer staff..
- Abide by GMVCC's "zero tolerance" policy for:
 - Use or possession of illegal substances, including alcohol, tobacco, drugs, and/or drug paraphernalia.
 - Illegal gambling.
 - Use or possession of weapons of any kind.
- Obey the general laws of the land.

For the safety and security of all, threatening the safety of one's self, another person or property, or failure to abide by the "zero tolerance" policy, will result in immediate removal from program.

Participant Signature signifying understanding of performer contract

Date

Parent Permission (if performer is under 18)

My signature below grants permission for _____ to participate in activities sponsored by the Greater Maple Valley Community Center (GMVCC), including field trips & transportation in approved vehicles (vans or designated staff car), and assume all risks and hazards of the conduct of these activities. I agree to hold harmless GMVCC, its officers, employees, volunteers and agents, from all liability including any and all claims stemming from injuries, damages or losses that may be incurred by participation in, &/or the transportation to/from, these activities. I also grant GMVCC permission to use photos that may be taken of participant during activities for use in various publications, including GMVCC newsletter, web site, press releases and other articles.

My signature below also authorizes GMVCC staff to obtain emergency medical treatment for _____ in the event that I cannot be reached, and such treatment is deemed necessary by medical professionals.

Parent Signature authorizing program permission & medical treatment

Date