



MARKETPLACE BUSKING APPLICATION FORM

APPLICANT DETAILS		
NAME OF GROUP/ARTIST/PERFORMANCE:		
CONTACT PERSON'S NAME:		
CONTACT'S ROLE:		
CONTACT NUMBERS	MOBILE:	AH:
	EMAIL:	
WEBSITE:		
ADDITIONAL (social media, soundcloud etc)		

PERFORMANCE DETAILS

This is your opportunity to pitch your act/group/performance to help us understand how we can incorporate your performance into the Marketplace Busking Program. We will endeavour to promote your performance through our social media channels, however this is not guaranteed.

Entertainment type:	
eg. Solo performance, music group, African drummers, etc.	
Performance Details:	
Brief description about your performance. E.g. group numbers, style, props used etc	
Preferred performance date/s	
Preferred performance time/s	

SUPPORT MATERIAL

Please provide any support material you have via email to tracey.thomas@ap.jll.com

E.g. Professional photos

Biography/background information Audio file or YouTube link

Please note if you don't have any of the above this will not exclude you from the program.

Do you consent to the use of your biography and photo being used to promote the Busking Program in Wagga Marketplace collateral, including social media? <i>Please note if you select No, this will not exclude you from the program.</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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TERMS AND CONDITIONS

1. REQUIREMENTS TO NOTE

- 1.1. Bookings are essential and are to be made 2 weeks in advance.
- 1.2. Bookings are limited to 1 booking per artist, per month
- 1.3. Completion of this form does NOT guarantee entry into the Busking Program.
- 1.4. Wagga Marketplace Centre Management reserves the right to cancel participant's involvement at any time.
- 1.5. Please ensure you correctly complete this application and all relevant documentation is attached.
- 1.6. Applicants MUST be over the age of 16 years old

2. SELECTION CRITERIA

- 2.1. Centre Management takes into account many factors in making final selection. These may include but are not limited to: the number of applications, act size, genre of act etc.

3. INDEMNITY

- 3.1. The participant agrees to indemnify and to keep indemnified the Council, the owners and management and representatives of Wagga Marketplace, its servants and agents, and each of them from and against all actions, costs, claims, charges, expenses, penalties, demands and damages whatsoever which may be brought or made or claimed against them, or any of them, arising from the participant's performance or purported performance of its obligations under this agreement and are directly or indirectly related to the negligent acts, errors or omissions of the applicant/s. The participant's liability to indemnify the Council, the owners and management and representatives of Wagga Marketplace, its servants and agents shall be reduced proportionally to the extent that any act or omission of the Council, the owners and management and representatives of Barkly Square, its servants or agents, contributed to the loss or liability.

4. OTHER

- 4.1. The lawful directions of members of the NSW Police, authorised security guards, centre management, staff and crew must be complied with at all times.
- 4.2. Centre management takes great care in planning and presenting a safe and happy event. However it is understood that in being involved in this program you agree to fully indemnify the Council, the owners and management and representatives of Wagga Marketplace against any claim laid against it, either by members of the public or persons engaged in any activity associated with the program who, as a result of the program, suffer personal injury, property damage or financial loss.
- 4.3. Please advise centre management immediately if there are any changes to your participation.
- 4.4. The participant shall comply with the requirements of the NSW Occupational Health and Safety Act 2000, Local Government Act 1989 and any Local-Laws, or Regulation made thereunder and shall be liable for any breach of such Acts, Local Laws, or Regulations. All other Acts, Statutory Rules, provisions and any Regulations of the Commonwealth of Australia or State of Victoria, for the time being in force shall be complied with.
The personal information to be supplied on this form is required in order to proceed with the participation arrangements for the busking program. It will be used by Centre Management only.

AUTHORISATION

Signed by: _____ Name: _____
(Signature) (Print name)

Dated this _____ day of _____ 2016

Thank you for registering your interest in the Marketplace Busking Program. We wish you the best with your application.