

SUBMISSION FORM

To enter, fill out the information below.

Designate one person to represent the band and act as the main contact with Let's Move Elgin

Band or Solo Act Name: _____

Main Contact Name and Age: _____

Main Contact Mailing Address: _____

Main Contact Phone: _____

Main Contact Email: _____

LIST OF BAND MEMBERS (Role = singer, lead guitarist, triangle player, etc.):

Name: _____ Age: ___ Grade: __ School: _____ Role: _____

Name: _____ Age: ___ Grade: __ School: _____ Role: _____

Name: _____ Age: ___ Grade: __ School: _____ Role: _____

Name: _____ Age: ___ Grade: __ School: _____ Role: _____

Name: _____ Age: ___ Grade: __ School: _____ Role: _____

Name: _____ Age: ___ Grade: __ School: _____ Role: _____

How long has your band or solo act been playing? _____

What type of music do you play? _____

Where have you played live before? _____

If selected for the contest, what instruments and equipment will you bring? What will you need in order to set up your equipment? _____

Email this form and audio demo link to terri@letsmoveelgin.com or drop off at 431 Summit St #101 between 9:00am-4:30pm (Mon.-Fri.) by September 25. Please have every member of your band sign below to indicate that they have read and understood the event guidelines. Electronic signatures are permitted.

Signature: _____

Signature: _____

Signature: _____

Signature: _____

Signature: _____

Signature: _____

Battle of the Bands Fine Print: Entrants authorize Let's Move Elgin to share their music in publications, on the Let's Move Elgin website and on social media, with appropriate credit to the musicians. Submission of an entry to the contest automatically constitutes acceptance of all conditions set forth in this form. Entries that do not comply with these rules will be ineligible for the contest