

**Ojai Bellydance Festival Performer Application**  
**Saturday, March 10, 2012**

Name of Contact person:

\_\_\_\_\_

Stage Name:

\_\_\_\_\_

Street Address:

\_\_\_\_\_

City / State / Zip Code

\_\_\_\_\_

Phone/s:

( \_\_\_\_\_ ) \_\_\_\_\_ / ( \_\_\_\_\_ ) \_\_\_\_\_

e-mail

\_\_\_\_\_

Category & Time (check appropriate):  3-5 min Solo (student)  5-7 min solo

5-7 min duet (student)  8-10 min duet (professional)

10 min troupe (student)  12-15 min troupe (professional)

Describe your act: (live music, taped music tribal, fusion, folkloric, etc.) Please supply links to web page or YouTube if available. If requesting live music w/ festival bands, indicate here:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe props used (sorry, no open flame), any special needs you have, and scheduling preference :

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Troupe or Band: \_\_\_\_\_

Number in Troupe: \_\_\_\_\_

Their names:

---

---

---

**Liability Waiver (must be signed to perform)**

I understand that I am completely responsible for my own health and safety while participating in Ojai Bellydance Festival. I agree to release from liability and hold harmless Ojai Bellydance Festival, Ojai Women's Club and/or any of their agents in the event of loss or injury due to my participation in this event.

signed:

---

date:

---

Signatures of all Troupe or Band members and/or guardians if under 18: (attach separate sheet if necessary):

---

---

---

---

---

---

---

---

I (we) have read and understand the liability waiver

Thank you for your participation in the Ojai Bellydance Festival!

Please mail completed application to:

Ojai Bellydance Festival  
402 N. Fulton St.,  
Ojai, CA 93023

Festival Site (do NOT mail anything to this address)

Ojai Women's Club Building  
441 E. Ojai Av., Ojai, CA 93023