

Artist Associate Application

PLEASE NOTE:

- To qualify, artists must average at least 12 concert dates per year.
- Approved applications will be subject to a “child-focused” Police Background check

Tel. 905.565.6200 x3145
Fax 905.696.2166
Toll free: 1.800.387.5112 x3145

Please fill in this form completely and return to:

Artist Associate Program
World Vision Canada,
One World Drive
Mississauga, ON L5T 2Y4

Artist/Group Name: _____

Contact Person: _____

Referred By: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: Home: _____ Work: _____

Cell: _____

Email: _____ Website: _____

Individual Names & Instrument Played:

| Name | Instrument | Name | Instrument |
|-------|------------|-------|------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Manager (if applicable): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: Home: _____ Work: _____

Email: _____

Booking Agent (if applicable): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: Home: _____ Work: _____

Email: _____

What types of venues do you usually book? (Halls, etc.) _____

How many concerts did you book last year? _____

How many concerts have you booked this year? _____

What is the first potential concert/tour date that is conducive to initiate involvement? _____

Do you currently have a recording out? _____

What is your music style? _____

What is the typical age group of your audience? (you may check more than one box)

family teens 18-25 25+

Have you ever been convicted of a criminal offence for which a pardon has not been granted? If so, please explain.

World Vision Canada describes itself as a Christian, humanitarian relief and development organization.

What motivates you to apply to the Artists Associates program?

Please list three other references with phone numbers:

1. _____

Phone Number: _____

2. _____

Phone Number: _____

3. _____

Phone Number: _____

Please send World Vision Canada the following:

- A sample album/recording in CD form
- Any video you have produced
- Full bio/promo kit including 8x10 photo
- Itinerary from last 12 months
- Future itinerary

FOR OFFICE USE ONLY:

Date received: _____

Notes:

Reviewed by: _____

Dated approved: _____

By: _____

Interest:

HopeChild OR Traditional Sponsorship