

**DIRECTORY OF PERFORMING ARTISTS/GROUPS APPLICATION - FY 2009**

**Deadline: November 17, 2008**

**Send completed application to:** Susan Docker, Directory of Performing Artists,  
Connecticut Commission on Culture & Tourism, One Constitution Plaza, 2nd Floor, Hartford, CT 06103

**APPLICANT INFORMATION**

Name of Performing Artist/Group \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_ Website \_\_\_\_\_

Artistic Director \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_ Website \_\_\_\_\_

Booking Agent in Connecticut \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_ Website \_\_\_\_\_

Alternate Booking Agent \_\_\_\_\_

*(For groups with out-of-state agents, please list one Connecticut Contact)*

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_ Website \_\_\_\_\_

**LEGISLATIVE INFORMATION (OBTAIN FROM TOWN CLERK OR WWW.VOTESMART.ORG)**

CCT informs your legislator about your selection. It is important that you provide accurate information.

U.S. Representative's Name \_\_\_\_\_ District # \_\_\_\_\_

State Senator's Name \_\_\_\_\_ District # \_\_\_\_\_

State Representative's Name \_\_\_\_\_ District # \_\_\_\_\_

**FOR OFFICE USE ONLY**

App# \_\_\_\_\_ Ser# \_\_\_\_\_ DGR \_\_\_\_\_ Type of Activity - 05

Applicant \_\_\_\_\_

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**ETHNIC AFFILIATION OF ARTIST(S) IN GROUP**

In order to meet State and Federal reporting requirements, please supply the following information. This data will not be considered in the evaluation of your application. **Individuals may indicate their predominant ethnic identity by selecting one or more of the following. Groups may only select one of the following to indicate the predominant ethnic identity of the group.**

- American Indian/Alaskan Native     Asian     Black/African American     Hispanic/Latino  
 White     Native Hawaiian/Pacific Islander     No single group

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**PERFORMING GROUP MEMBERS**

\_\_\_\_\_ Number of artists in your group    \_\_\_\_\_ Arts Discipline Code (Example: Dance 01 - see codes on p. 3 of Guidelines)

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**SUPPORTIVE INFORMATION**

Describe your performance(s) or program(s) including workshops and residencies.

Describe your experience with diverse audiences (educational or community facilities).

Describe your upcoming schedule of performances or programs for the 2007-2008 season. Be sure to list names of presenting organizations.

Applicant \_\_\_\_\_

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**REFERENCES**

**(PLEASE LIST YOUR TOURING ENGAGEMENTS FOR THE LAST TWO SEASONS)**

Presenting Organization \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Date Performed \_\_\_\_\_ Name of Facility \_\_\_\_\_

Presenting Organization \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Date Performed \_\_\_\_\_ Name of Facility \_\_\_\_\_

Presenting Organization \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

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Presenting Organization \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Date Performed \_\_\_\_\_ Name of Facility \_\_\_\_\_

Applicant \_\_\_\_\_

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**SUPPORT MATERIALS**

All artists/groups must enclose a **ten-minute** videocassette (VCR format), DVD or CD sample of their work with this application. Panelists do not go on site visits so videotapes, DVDs or CDs need to be of **excellent quality** and will be evaluated for the artistic quality of performance and audience reaction. Videotapes must be submitted in 1/2" VHS format. Label the recording with your name, date, playing time, and production credit. Cue videotapes or indicate a specific track or segment that you wish reviewed.

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**CHECKLIST**

Please include the following additional application materials with your submission. Please assemble your application packet in the following order. See the program Guidelines for more information.

- Completed application form (3 pages). Make a copy for your files.
- Three (3) letters of recommendation (from presenters or artists)
- One (1) color photo of artist/group (5x7 or 8x10)
- Resume of performing artist or artistic director of group.
- A list of performing engagements for 2007 and 2008
- Include one (1) promotional press packet including no more than three (3) reviews or promotional brochures
- A high quality videotape, DVD or CD of a performance with audience reaction
- Authors and poets must provide a copy of at least one published book of fiction or poetry or six separate works from literary magazines or books.
- Proof of residence (driver's license or voter registration)

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**CERTIFICATION**

Under penalties of perjury, I declare that I have examined information contained in the application and accompanying documents and, to the best of my knowledge and belief, they are true, correct and complete, and I am in fact eligible under this program. I am aware that the submission of any false information or omission of any pertinent information resulting in the false representation of a material fact may subject me to civil and/or criminal penalties for filing of false public record and/or forfeiture of any rights awarded under this program. I further declare that I have reviewed the Commission on Culture & Tourism's Grant Overview Guidelines and acknowledge that it is my responsibility as a applicant to become familiar with these guidelines and that failure to comply could result in ineligibility for the program. I understand that should I have any questions regarding these guidelines, I may contact CCT. I further understand that all documents submitted become the property of CCT.

Applicant Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_