



FESTIVAL TECH SHEET & STAGE DIAGRAM

Cherry Festival 2019



GROUP/BAND NAME: _____

CONTACT NAME: _____

CONTACT PHONE NUMBER(S): _____

PERFORMANCE DATE: _____

(Office Use)

PERFORMANCE TIME: _____

(Office Use)

TYPE OF PERFORMANCE: _____

WHAT FORMAT IS YOUR MUSIC IN? CD LIVE

** PERFORMANCE NUMBERS MUST BE ALL ON ONE CD AND IN ORDER OF PERFORMANCE*

** PLEASE ENSURE AHEAD OF TIME THAT BURNED CD'S ARE PLAYABLE*

NUMBER OF VOCAL MICROPHONES _____

NUMBER OF INSTRUMENT MICS _____

** PLEASE INDICATE ON ATTACHED STAGE DIAGRAM WHAT TYPE OF INSTRUMENT/AMPS WILL BE MIC'ED*

NUMBER OF MONITORS/MIXES _____

NUMBER OF WIRELESS MICS YOU ARE BRINGING _____

** IF WIRELESS IS REQUIRED YOU WILL NEED TO PROVIDE YOUR OWN*



PLEASE FILL OUT AND RETURN THIS FORM FRONT AND BACK ALONG WITH APPLICATION:

Gem County Chamber of Commerce / P.O. Box 592, Emmett, ID 83617 / (208) 365-3485 Fax: (208) 365-3220

www.emmettcherryfestival.com/ E-mail: chamber@emmettidaho.com