

**COCK-A-DOODLE DAYS
BATTLE OF THE BANDS/FANS
July 3, 2010 10:00 to 3:00
HARRISON COUNTY FAIRGROUNDS**

APPLICATION

NAME OF BAND: _____

MUSIC GENRE: _____

BAND WEBSITE: _____

OFFICAL BAND CONTACT: (NAME, PHONE #, E-MAIL):

Please list all band members' names and requested information here:

Name	Age	Instruments

- Rules: No profanity on or near stage area
No alcohol on or near the stage area
No overly revealing dress
No suggestive actions on stage**

The undersigned agrees to indemnity, defend, and hold harmless the Cock-A-Doodle Committee, The Harrison County Fairgrounds and all volunteers in association with the event from any and all claims, liabilities, expenses or damages of any nature, including attorney fees arising out of, or in any way connected with the performance of the agreement by the undersigned, the undersigned's agents, officers, employees, subcontractors, or independent contractors hired by the undersigned. This indemnity shall apply to all claims and liability regardless of whether any insurance polices are applicable. The policy limits do not act a as a limitation upon the amount of indemnification to be provide by the undersigned.

Signature: _____ **Date** _____

THE WINNING BAND WILL PERFORM THEIR OWN TEEN CONCERT THAT EVENING FROM 6:00 to 8:00 PM.

MAIL APPLICATIONS AND PERMISSION SLIPS TO:

**Pamela Bennett Martin
Bennett & Bennett Ins. Inc.
351 E Chestnut St.
Corydon, IN 47112**

COCK-DOODLE DAYS BATTLE OF THE BANDS/FANS

Dear Parent/Guardian:

Your minor is interested in participating in the Cock-A-Doodle Days Battle of the Bands/Fans on July 3, 2010. In the best interest of the minor, the organization and yourself, we will require any participants under the age of 18 to have this form completed and signed.

Please complete this form and turn it in prior to or along with the band application from in order to allow his/her participation in this event. If you have questions please contact me at 812-951-3206.

Thank You,

Pam Bennett Martin
Battle of the Bands/Fans Coordinator

Minor's Name _____ Date of Birth _____

Band Name _____ Home Phone # _____

Address: _____

Parent/Guardian Name _____ Home Phone# _____

Address: _____

I give _____ (minor's name) permission to participate in the Cock-A-Doodle Days Battle of the Bands/Fans on July 3, 2010. The Cock-A-Doodle Event Committee is a safety conscious organization and will work to make the competition as safe possible. However, I understand that there are inherent risks associated with any production. In the vent of accident or injury, or loss or damage of equipment, I herewith agree to release the Cock-A-Doodle Event Committee, Harrison County Fairgrounds and it volunteers, employees, or agents of liability.

Signature _____ Date _____