

## Saturday, April 26, 2025

## **Kidz Zone** Stage Performance Application

Performer(s) Name:		
	(Performance name that will	appear on Stage Schedule Board)
Contact Person:		
Address:		
City:	State:	Zip:
Phone Number:	State: Zip: Cell:	
Email address:		
	Performance Deta	ills
	nce must be completed by	ge, Saturday April 26, 2025 from 8:30pm. Times include set up and take
Number of performers: _		
Sound equipment neede	d: 	
Performance time choice	es: please pick 3 and w	e will call to confirm a time
Length of performance: _		
Special requests:		
If you have questions ale	ace contact luctin Dick	anc (a) X1 /_6X5_1662 or

If you have questions, please contact Justin Pickens @ 817-685-1663 or jpickens@eulesstx.gov