



mesa
amphitheatre

www.mesaamp.com

Concert Application

Name of Promoter/Company _____

Contact Name _____ Phone # _____

E-mail address: _____

Promoter Website: _____

Desired Show Date(s) _____ Times: _____

(City of Mesa has a 10pm curfew for amplified sound)

Headliner _____

Headliner Website: _____

Opening Act(s) _____

Do you currently have a contract/agreement with the act(s)? Yes No

Music Type/Genre: _____

What age group does this act primarily attract? ___ 12-17 ___ 18-25 ___ 26-35 ___ 36+

Are any special security measures necessary? _____

Is there a website or You-Tube link to view samples of the band(s)? If so, please provide that information:

Estimated number of tickets expected to sell: _____

How many events/concerts do you promote annually? _____

Have you promoted this act before? Yes No

If yes, please list the venue(s): _____

Please provide three references from venues in which you have recently promoted events.

REFERENCE 1

Name and Address of Venue: _____

Contact: _____ Phone Number: _____

Name of show/Act: _____

Number of Tickets Sold: _____

Any special security measures or incidents during the event? _____

REFERENCE 2

Name and Address of Venue: _____

Contact: _____ Phone Number: _____

Name of show/Act: _____

Number of Tickets Sold: _____

Any special security measures or incidents during the event? _____

REFERENCE 3

Name and Address of Venue: _____

Contact: _____ Phone Number: _____

Name of show/Act: _____

Number of Tickets Sold: _____

Any special security measures or incidents during the event? _____

COMPLETION OF THIS CONCERT APPLICATION MUST BE SUBMITTED AND REVIEWED BEFORE A TENTATIVE BOOKING CAN BE MADE FIRM.

PROMOTER SIGNATURE

DATE