



ARTIST PROFILE
CREATIVE ARTS PROGRAMS (CAPs)
AUDITIONS
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Please complete and return this form with the \$20 (non-refundable) application fee by **Friday, January 15, 2010** to: Arts Council of Fairfax County, Creative Arts Programs, 4022 Hummer Road, Annandale, VA 22003.

1. PLEASE TYPE OR PRINT CLEARLY:

Name of Group or Artist _____
Contact Person _____
Mailing Address _____
City _____ State _____ Zip _____
Home/Office Phone: _____ Cell Phone: _____
Fax: _____ Email: _____
Website: _____

ARTIST BACKGROUND

2. ATTACH A ONE-PAGE RESUME

3. LIST RECENT PERFORMANCES (completed within past 12 months):

4. PLEASE CHECK ONE appropriate category that best fits your program(s):

- Visual Art Dance Educational Resource Literary Puppets Music Storytelling
 Theatre (includes: mimes, magicians, comedians, etc.)

5. VIDEOTAPE: Is a videotape of your performance/presentation available? Yes _____ No _____

NOTE: If selected for CAPs the Arts Council would like a copy for the CAPs video files.

PROGRAM DESCRIPTION – attach on separate pages the following information:

6. OVERALL DESCRIPTION - Artist/Group Background (Not to exceed **100 words**)

7. PROGRAM OFFERING(S) - (Not to exceed **50 words for each program**)

*If selected, your information will be used for the 2010-2011 CAPs Directory.
The Arts Council reserves the right to edit copy for clarification and brevity.*

PROGRAM OFFERING (if more than one program, attach a copy of this page for each program):

8. TITLE OF SHOW/PROGRAM: _____

9. NUMBER OF ARTISTS: _____

10. LENGTH OF SHOW/PRESENTATION: _____

11. FEE TO SCHOOLS: One Show \$ _____; two shows at same location, back-to-back: \$ _____

12. RESIDENCIES (if offered): Fee to schools \$ _____ Average length of residency _____

13. OTHER FEES: Indicate fee, if different, for non-school performances/presentations \$ _____

14. TECHNICAL REQUIREMENTS (please check items needed for a performance & indicate #):

Piano	_____	Electrical outlet	_____
Chairs (#)	_____	Raised stage	_____
Tables (#)	_____	Stage size needed	_____
Microphone*	_____	Other (specify)	_____

* Artists provide their own equipment for performances

15. TARGET AUDIENCE AGE/GRADE FOR THE PROGRAM (check all that are appropriate):

Preschool ___ K - 3 ___ 4 - 6 ___ 7 - 9 ___ 10 - 12 ___ Adult ___

16. AUDIENCE SIZE (check all that are appropriate):

0 - 49 ___ 50 - 99 ___ 100 - 149 ___ 150 - 199 ___ 200+ ___

Is there a maximum audience size? _____ If yes, what size? _____

17. ANY AUDIENCE RESTRICTIONS? (explain): _____

Please enclose a check in the amount of \$20 for application fee.
Make check payable to: Arts Council of Fairfax County

Mail to:
Arts Council of Fairfax County, Inc.
Creative Arts Programs (CAPs)
4022 Hummer Road
Annandale, VA 22003

Artist Profile and \$20 application fee are due by **Friday, January 15, 2010**

For further information contact the Arts Council's Director of Performing Arts Programs at
703-642-0862 ext. 3 or **sfridy@artsfairfax.org**