



CALL TO ARTISTS

FIRST NIGHT DOVER

First Night Dover is a, New Year's Eve celebration of the arts that takes place in downtown Dover on December 31 from 3:00 p.m. to midnight. Artists of all disciplines are invited to submit this performance proposal. All proposals are welcome. First Night Dover, Inc. is a non-profit 501(c)(3) organization.

For the past 10 years, Delaware's capital city is transformed on December 31st. Come join us in creating a unique festival as we usher out the old and welcome in the first magical night of the New Year. With your imagination, creativity and energy, First Night Dover is more than a good time for individual citizens; it is community synergy, as we celebrate together what we have as a community and what we can dream of for ourselves, our families and for Dover.

First Night is an alcohol free celebration—promoting responsible celebrating through the arts. First Night Dover combines well-known talent with tomorrow's artists and has earned a reputation for the quality of its artistic programming. Starting in the afternoon with performances geared to children, the evening will provide entertainment suitable for all ages. The nine-hour festival offers spirited street entertainment as well as indoor performances, beginning with early performances for young children and continuing until a musical midnight fireworks finale on Legislative Mall.

Almost hundreds of performances are staged simultaneously in more than 20 indoor venues often including bank lobbies, museums, store windows, government buildings, historic houses, and churches. Most venues are non-traditional indoor spaces with minimum technical support, so performers are encouraged to be as self-contained as possible. Multiple performances are scheduled at each venue, with new audiences admitted for each performance. If chosen, performers are expected to present a minimum of four performances throughout the evening.

First Night is a unique opportunity for artists to perform for attentive audiences of all ages, to build new audiences, and to attract new booking opportunities. Performers are encouraged to present new or site-specific works, and may sell their recordings on-site to generate additional earnings.

Selection will be based primarily on artistic merit, with attention to uniqueness, feasibility, affordability, venue availability, and programmatic balance.

Proposals **MUST** be accompanied by a cassette, video/DVD, or CD for review (visual artists may send visual materials). Materials must be current (within one year). Previous applicants must complete this form and send updated materials. All materials become the property of First Night Dover and will be returned only by special arrangement and at applicant's expense.

Directions: Please understand artist will be performing in non traditional venues including bank lobbies, churches, halls, etc. Please complete the application below and email or send it to the address at the bottom of this page along with your demonstration materials/promotion kit.

Performer/Group Name (as you want it to be publicized) _____

Contact _____ Number in Group _____

Street Address _____ Email _____

City/State/Zip _____

Website _____

Phone (home) _____ (cell) _____ (fax) _____

I propose to perform (check one) ___ 5 sets @ 30 min. ea. ___ 4 sets @ 45 min. ea. ___ Other (explain)

Proposed Fee Range \$ _____

Detailed Description of Proposed Performance (4 sentence description as you'd like it to appear in the program)

Performance Category: (You may choose more than one.)

- | | | | | | | |
|-----------------------------------|-----------------------------------|---------------------------------------|-----------------------------------|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Folk | <input type="checkbox"/> New Age | <input type="checkbox"/> Storytelling | <input type="checkbox"/> Comedy | <input type="checkbox"/> Historical | <input type="checkbox"/> Celtic | <input type="checkbox"/> Cajun/Zydeco |
| <input type="checkbox"/> Big Band | <input type="checkbox"/> Children | <input type="checkbox"/> Dance | <input type="checkbox"/> Magic | <input type="checkbox"/> R&B | <input type="checkbox"/> Vocal | <input type="checkbox"/> Bluegrass |
| <input type="checkbox"/> Choral | <input type="checkbox"/> Film | <input type="checkbox"/> Jazz | <input type="checkbox"/> Rock/Pop | <input type="checkbox"/> World Beat | <input type="checkbox"/> Blues | <input type="checkbox"/> Classical |
| <input type="checkbox"/> Theatre | <input type="checkbox"/> Country | <input type="checkbox"/> Internat'l | <input type="checkbox"/> Opera | <input type="checkbox"/> Variety | <input type="checkbox"/> Street Theatre | |

Other (describe) _____

Are you interested in participating in the Finale (11:15 pm)? Yes ___ No ___

Do you need the following: (please specify size and quantity)

Chairs _____ # Table _____ Size _____ Stools _____ # Piano

Additional technical needs (audio, stage, etc.) Can you provide? Is your need flexible?

Do you need any of the following? (Please indicate how many of each)

___ Electrical Outlets (Please bring all necessary power strips and extension cords!) ___ Boom-style Microphone Stands

___ DI Plug-ins (for instruments) ___ Straight Microphone Stands

First Night Dover * P.O. Box 1836 * Dover* DE * 19903
firstnightdover@comcast.net firstnightdover.com

Microphones: ____ Vocal, ____ Instrument, ____ Monitors

Total Number of Technicians/Support Staff :

What size performing area do you need?

Will you bring your own lights?

Your specific space needs are:

Time needed for set up?

Do you need assistance in setting up?

If yes, how many people _____ for _____ minutes

Are you willing to perform outside?

Will you sell your tapes or CDs at the event? Yes No

Please include the following materials:

Either: Audio Cassette Video DVD CD

All: Bios Press Stage Plot Photos (also email to firstnightdover@comcast.net)

Performance Resume Reviews Other _____

Mail proposal and materials to: First Night Dover, P.O. Box 1836, Dover, DE 19903

For Office Use Only:

____Photo ____4WU ____2WD ____Htl Rm ____#Pfrs ____#Tch ____Cntret

Location:

Time: