First Night® Akron 2015

CALL FOR artists

Performances

Most performances are 30-45 minutes and are repeated 2-3 times with a 15-30 minute break between sets. Several acts may share the same stage.

Outdoor Visual Installations

Do you have a creative idea of how to "dress up" Downtown for New Year's Eve? We'd like to hear your proposal for Outdoor Visual Art Installations that will enhance the First Night footprint and add excitement to the First Night experience for people of all ages. Any space within the First Night footprint is available.

Interactive Activities

Hands-on creative workshops and activities are a favorite among families at First Night. Proposals should include all associated costs and volunteer support.

Roving Entertainers

Many opportunities exist for traveling entertainment. Buses, hallways, lobbies and street corners need entertainers too!

Proposals for First Night® Akron are being accepted for all performing and visual arts. We encourage artists of all disciplines: musicians, dance groups, theatre groups and visual artists to submit a proposal to perform at our New Year's Eve celebration of the arts on Wednesday, Dec. 31, 2014.

Artist selection is based on artistic merit, feasibility and the availability of funds.

Submit a separate application and support materials for each proposal.

An online application is also available at www.firstnightakron.org.

www.firstnightakron.org

All proposals are due Friday, July 25, 2014.

Include a self-addressed stamped envelope if you would like your materials returned.

First Night® Akron is a family-friendly, alcohol-free New Year's Eve celebration of the arts.

First Night® Akron

A program of
Downtown Akron Partnership
Greystone Hall
103 S. High St., 4th floor
Akron, OH 44308

Phone: 330-374-7690
Fax: 330-374-7620

19th year

First Night® Akron

Application deadline Friday, July 25, 2014

NON PROFIT ORG.
U.S. POSTAGE
PAID
AKRON, OH
PERMIT NO. 809

First Night® Akron
Call for Artists Application

This application must be completed in its entirety by Friday, July 25, even if you have performed in the past. Incomplete applications will not be considered.

Name of Group or Artist: _____ **Number of Participants:** _____

Contact Person: _____ **Phone/Day:** _____ **Phone/Eve:** _____

Address: _____ **City/State/Zip:** _____

Email: _____ **Website:** _____

Requested Fee: _____ **Length of Program:** _____ **Number of Repeated Performances for Requested Fee:** _____

Entertainment Genre: (check all that apply)

___ Dance ___ Puppetry/Circus Arts ___ Visual/Installation Art ___ Literary/Storytelling/Poetry

___ Theater ___ Film/Video/Projections ___ Interactive/Participatory ___ Make & Take

___ Music (define genre):_____ ___ Other _____ ___ Outdoor

REQUIREMENTS:

Do you have your own sound equipment? ☐ Yes ☐ No If yes, are you willing to share your equipment with other performers? ☐ Yes ☐ No

If you are willing to share your equipment, what compensation would you require? _____

Give a detailed description of the performance or project you propose: _____

_____

_____

Please provide a description of your work that would be included in our First Night Event Guide: (30 word maximum) _____

_____

_____

Describe your space requirements including required dimensions: _____

What type of space or venue would work best for you: _____

Support materials enclosed: ☐ CD ☐ DVD ☐ VHS ☐ Audio Tapes ☐ Photos ☐ Drawings, etc.

or provide a link to support materials on your website, Facebook or YouTube: _____

List all technical requirements including sound, lighting, power needs (*artists must be able to provide sound, if needed*):

_____

List all other requirements including dressing rooms, etc.: _____

How are you going to help promote First Night? ☐ On website or Facebook ☐ Distribute printed materials provided by First Night

☐ Promote First Night to contacts via Facebook, Twitter, e-mail lists, etc. ☐ Other _____

Do you have promotional videos on your website, Facebook or YouTube account that we can direct people to when promoting you? ☐ Yes ☐ No

If not, are you willing to create them? ☐ Yes ☐ No

Signature _____ Date _____

Call 330-374-7690 with any questions. Complete this form and mail to:

First Night Akron • Downtown Akron Partnership • Greystone Hall • 103 S. High St., 4th floor • Akron, OH 44308

This application is also available online. Go to www.firstnightakron.org if you prefer to complete an online form.