



Riverfront Roar
River Idol Competition
July 10, 2009
APPLICATION

Name: _____ Date: _____

Stage Name (if different): _____ Age: _____

Mailing Address: _____

Phone Number: _____

Song and Artist to be Performed: _____

Second Song and Artist to be Performed (in the event of a tie or second round):

Is this the first time you have attended the Marietta Riverfront Roar? YES NO

How did you hear about the contest? *Please circle one.*

RADIO TELEVISION POSTERS FRIEND/FAMILY

WEBSITE (please specify) _____ OTHER (please specify) _____

Applicant's Signature _____

*Mail completed applications and your \$20 check made payable to the Marietta Riverfront Roar
to Gary Williams, 221 Smith Drive, Marietta, OH 45750.*

FOR OFFICE USE ONLY

Date of Application: _____ Payment Date _____

Payment Type: CHECK CASH (on-site only) Received By: _____

Performer Number _____ Results _____ of _____