

(((Send + Receive))) : A Festival of Sound

Submission Application

Name:

Artist/Group Name (if applicable):

Address:

Phone Number:

E-mail:

Type of Proposal (check one):

Audio performance

Installation

workshop/talk

other (please specify): _____

On a separate page, please include a brief description of the piece which you are proposing (maximum 1 page), a

Curriculum Vitae, and a work sample.

Please check the format submitted:

CD

DVD MD

VHS URLs

slides

other (please specify): _____

Signature: _____

Date: _____

Send completed submissions to:

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300-100 Arthur Street

Winnipeg, Manitoba, Canada

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