

MUSIC PROGRAMMING APPLICATION

CONTACT INFORMATION

Contact Name:
Band Name:
Address:
Email:
Phone:
Website:
Link(s) to performance examples:
a:
b:
c:
List venues of past performances:
a:
b:

Genre of music (check all that apply):

c:

Band composition:

Date Submitted:

Country Rock Alternative R&B/Soul Classical Hip Hop/Rap Blues Electronic Jazz Other (please list):

PLEASE SUBMIT TO INFO@BUFFALOWATERFRONT.COM

This application does NOT apply to the Canalside Live Series