

**Midwest Regional Alternative Dance Festival (RAD Fest)  
Alternative Spaces Live Performance  
2018 Submission Form  
Application Deadline: October 21, 2017**

**Contact Info**

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**About the Work**

Performing group name (if applicable): \_\_\_\_\_

Choreographer's/Improvisor's Name: \_\_\_\_\_

Title of Work/Excerpt: \_\_\_\_\_

Length of Work/Excerpt (10 min. maximum): \_\_\_\_\_ Number of Artists in Work: \_\_\_\_\_

Does the work include any material that may be considered "mature content"?  Yes  No

If Yes, please describe: \_\_\_\_\_

Video Link: \_\_\_\_\_

Video Link Password: \_\_\_\_\_

I have included a DVD

**Travel Stipend**

How far will you be traveling to get to the Wellspring Theater at the Epic Center? \_\_\_\_\_ Miles

Some choreographers/improvisers may receive a stipend to help off-set the cost of travel at a rate of \$50-\$300 (rate to be determined by distance traveled and available funds). Choreographers/improvisers will be notified whether they will receive a stipend in their RAD Fest acceptance letter. Stipends will be given out after the festival. Please allow four weeks for stipends to be dispersed.

**Release**

I hereby release Wellspring/Cori Terry & Dancers as well as any and all municipal, government, or personnel whose properties or services are used and any or all sponsor(s), company(s), agency(s), or individual(s) from responsibility for any injuries or damages that I, my company or my students suffer as a result of participation in Wellspring's Midwest Regional Alternative Dance Festival. I will additionally permit my name and picture to be used in any broadcasts, telecasts, marketing materials, or any media for promotional purposes. I also understand that the entry fee is non-refundable. I submit that the choreography/improvisation is original and created by the choreographer/improvisor whose name is submitted and that all information on this form is true and complete. I have read the entry information provided and certify by my signature my compliance.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\$30 Submission Fee Enclosed (Submission is not valid without the accompanying fee). Make checks payable to Wellspring/Cori Terry & Dancers.

\*Mailing Address: Wellspring/Cori Terry & Dancers, Attn. Rachel Miller, 359 S. Kalamazoo Mall Ste. 204, Kalamazoo, MI, 49007

\*Email Address: rachel@wellspringdance.org