



Love's Music Productions, Inc. - Interest Form

Dear Friends,

We invite you to complete an Interest Form to express your interest in participating in Love's Events. Artists are currently being sought in the following areas: Love's Band, Background Vocals, Solo/Featured Artists, and Non-Music Artists.

We are seeking artists who can professionally entertain and perform a wide variety of musical selections before large audiences. If you fit into any of the above categories and wish to perform at a Love's Music Productions event, we invite you to fill out the INTEREST FORM below and mail the information to us.

To fully assess your talent and abilities, we would appreciate your mailing us one of the following: CD, Cassette, DVD, or Video of a performance. Please mail all information to: Love's Music Productions, Inc., Attn: Gregory A. Love, President/CEO/Producer, 110 Sansom Lane, Deptford, NJ 08096.

****IMPORTANT NOTE****

- We do not return any materials, so please do not mail us your originals.

Thank you and we appreciate your interest in Love's Music Productions, Inc.

Sincerely,

Gregory A. Love

Gregory A. Love
President/CEO/Producer
Love's Music Productions, Inc.



INTEREST FORM

Personal Information

Full Name: _____
Last First M.I.

Address: _____
Street Address

_____ City State ZIP Code

Home Phone: () Cell Phone: ()

E-mail Address: _____

Educational Background

| | | | |
|---------------------------|-------------------|------------|-----------|
| High School: _____ | Did you Graduate? | Yes | No |
| College/University: _____ | Degree: | _____ | |
| Master's Degree: _____ | Degree: | _____ | |
| Other: _____ | Degree: | _____ | |

Musical Background

| | <i>Describe</i> | <i>Formally Trained?</i> | | <i>Explain</i> |
|-----------------------------|--------------------|--------------------------|-----------|----------------|
| Primary Instrument: _____ | Skill Level: _____ | Yes | No | _____ |
| Secondary Instrument: _____ | Skill Level: _____ | Yes | No | _____ |
| Other: _____ | Skill Level: _____ | Yes | No | _____ |

Styles of Music and Entertainment

| | | | |
|-----------------------------------|---|------------------------------------|---|
| Type of Artist or Group: | Styles of Music (If a Musician): | | |
| <input type="checkbox"/> Musician | <input type="checkbox"/> Jazz | <input type="checkbox"/> Rock | <input type="checkbox"/> Non-Music Artist. <i>Please Elaborate:</i> |
| <input type="checkbox"/> Singer | <input type="checkbox"/> Blues | <input type="checkbox"/> Acapella | |
| <input type="checkbox"/> Other | <input type="checkbox"/> Traditional | <input type="checkbox"/> Classical | |

Professional & Character References

Please list (2) professional references.

| | |
|-------------------|---------------------|
| Full Name: _____ | Relationship: _____ |
| Profession: _____ | Phone: () _____ |
| Full Name: _____ | Relationship: _____ |
| Profession: _____ | Phone: () _____ |

Additional Information you would like to share about yourself:

The information and statements contained in this profile are true to the best of my knowledge. I further acknowledge that the references listed above will be contacted to verify my skills as a musician and act as my character references.

Signature: _____ Date: _____

Printed Name: _____