



August 23rd – August 24th, 2008
Tribute Artist Contest Registration Form

Name: _____

Address: _____

City: _____

Province/State: _____ Country: _____

Postal/Zip Code: _____ Phone: _____

Email: _____

Artist Representing _____ Youth ___ Adult ___

Please read the following and sign to indicate your agreement:

I agree to participate in all facets of the program. I agree that my likeness and voice may be used in any promotional and/or audio/video reproduction as a result of my participation in **Rock of Ages 2008**, and that no remuneration will be paid to me. I agree that all decisions pertaining to the judging of the **Rock of Ages 2008** Tribute Artist Contest are final. I agree that any misconduct could lead to my immediate disqualification from the **Rock of Ages 2008**.

Signature: _____

Date: _____

Registration Fee for Rock of Ages: \$25.00/person

Memphis Motion

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N3R 2N9

(519) 752-1694

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*****The Festival Organizing Committee, reserves the right to revoke any registration, for any reason that the committee deems necessary to protect the integrity and image of Rock of Ages 2008*****