

APPLICATION FORM

® American Music Auditions

1214 16th Avenue South . Nashville, TN 37212-2902
800-767-4984 (toll free) . 615-321-0600 (wk) . 615-321-0182 (fax)

Please check one of the following boxes

Solo Artist Duet Artist Band 3 members Band 4 members Band 5 or more members

LAST NAME _____ FIRST NAME _____ MI _____

STREET _____ CITY _____

STATE _____ ZIP CODE _____ COUNTRY _____

E-MAIL _____ WEB SITE _____

My genre of music and performance would be more closely associated with the following radio formats of music in the USA

Alternative Americana Big Band Black Gospel Bluegrass Blues Classical Music
Contemporary Christian Country Gospel Country Music Dance Music Folk Jazz Music Latin
Music Movie Soundtracks Pop Music Rhythm & Blues Rock Music Salsa Music Songwriter
Demos Southern Gospel Soul Music Soundtracks Techno Music Teen Music Vocal Demos

MUSIC BACKGROUND SECTION: Please tell us a little about your background in music and what you would like to accomplish as an artist in the future: _____

Have you ever signed a record contract? Yes No Explain _____

Are you a member of ASCAP, BMI or SESAC? Yes No Explain

Please write down any questions that you might want answered by the Producers at this showcase of your music and get them turned in ahead of time _____

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Please answer the following questions?

Do you have your original material copyrighted with the Library of Congress yet?

Do you need an endorsement letter to play an ASCAP, BMI or SESAC showcase?

Do you need management?

Do you need a producer?

Do you need help with a single release and national radio promotion?

Have you read the Artist Survival Manual?

Do you have your own CD completed yet?

Do you have a demo?

Do you have a press kit?

Have you submitted your materials to a major label and been rejected?

Do you have specific questions that we can assist you with about the music business?

Do you have a video or video footage of your performance?

I am going to perform the following songs at this audition. Please list the legal titles of the songs and the songwriters and publishing information

_____ TITLE SONG ONE
_____ SONGWRITERS _____ PUBLISHER
_____ SONGWRITERS _____ PUBLISHER
_____ SONGWRITERS _____ PUBLISHER
_____ SONGWRITERS _____ PUBLISHER

_____ TITLE SONG TWO
_____ SONGWRITERS _____ PUBLISHER
_____ SONGWRITERS _____ PUBLISHER
_____ SONGWRITERS _____ PUBLISHER
_____ SONGWRITERS _____ PUBLISHER

This will certify that I give the principals of American Music Auditions the right to review my performance and share constructive criticism with me about my audition.

This will certify that I am _____ years of age.

Please sign your legal name and signature below

ARTIST SIGNATURE

Thank you for being a part of the American Music Auditions. If you have submitted a press kit, bio and demo, you will be hearing from the auditions within the next six weeks.