



Entry Form

Complete this form, save it on your computer, and then e-mail it to lk-entertainment@affinitygaming.com

Alternately, you may mail this form to:

Lakeside Hotel Casino
Attn: Battle of the Bands
777 Casino Drive
Osceola, IA 50213

Your entry will not be considered complete until we receive your entry form and a demo CD or a link to your music. Entry forms must be submitted by Saturday, June 10th.

Name of Band: _____

Name of Contact Person: _____

Address: _____

Phone: _____

E-Mail: _____

Band Social Media/Website: _____

How long has your band been together under this name? _____

Do you primarily play original or cover songs? _____

Band Influences: _____

Describe your style of music: _____

Approximate number of concerts performed a year: _____

Do you have a contract with a recording label? _____

Please provide us with information about the composition of your band by filling in the number of vocalists and instruments you have.

Vocalists: _____ Acoustic Guitar: _____ Electric Guitar: _____ Bass Guitar: _____

Drums: _____ Keyboard: _____ Other: _____

Names of band members: _____

Band members names cont'd: _____

Demo CD Enclosed: _____ OR

Link to your music: _____

I have read the Battle of the Bands details and have provided accurate information on this form.

Print Name: _____

Signature: _____ Date: _____