# The Cube Wodonga | Pre and post entertainment EOI

## Contact Details

**Applicant**
- ○ Individual
- ○ Organisation

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<th>Organisation Name</th>
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<table>
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<tr>
<th>Title</th>
<th>First Name</th>
<th>Last Name</th>
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**ABN**

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**Act Postal Address**

**Act Primary Mobile Phone Number**

Must be an Australian phone number.

**Act Primary Email**

Must be an email address.

## About your act

**Genre**

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**Type of act**

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**Description of act**

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**How many people participate in your act?**

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How long has your act been performing together for?

How long have the performers in your act been performing for individually?

How do you think your type of performance would suit the programs on show at The Cube Wodonga?

Your social channels

Website

Facebook

Instagram

YouTube

Other

Your images

Please attach promotional images
Attach a file:

Please provide a link to any video or audio content you may have:

Your requirements
Do you supply your own equipment?

If not, what equipment would you need supplied?

How much room would your act need?

Floor area (metres)

Will you need a stage riser?

Will you need a flat floor?

Do you have any accessibility requirements for your performance?
If yes, please specify

Licenses and costs

Do you have Public Liability Insurance?

If yes, please attached a copy of your current certificate of currency
Attach a file:

What are your hourly rates?

Do you have any other fees or charges?