



Email this cover sheet with application to: info@fruitflycircus.com.au

Name of Applicant – artist/group/company		
Name of Contact Person		
Contact Address		
Contact Phone/Email	Phone:	
	Email:	
ABN if applicable:		
Residency options:	1. Dates are fully flexible (tick box) <input type="checkbox"/>	
	2. Preferred dates:	
	A. _____ B. _____ C. _____	
	3. Only date option:	
	A. _____	
How many artists in your project/group/company?		
Project Title:		
Signature:		Date:

Please attach your required application material – See guidelines.