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Project #:	
<u>5201</u>	<u>1000</u>
<u>Area :</u>	<u>Local #:</u>

**SINGLE PERFORMANCE
 AND/OR
 PROGRAM SERIES**

REQUEST FOR PROJECT FUNDING

LIST ONLY ONE (1) SINGLE PERFORMANCE OR ONE (1) PROGRAM SERIES

Name of Sponsor/Presenter		Contact Name	
Address	City	State/Province	
Telephone	Fax	Email	

Federal Tax Identification Number:	Is the Sponsor/Presenter a 501 (c) (3) Organization?
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Enclose a completed W-9 form with this submission

Program Goal:						
Side musician per Performance \$ _____		Contractor And/Or Leader Performance \$ _____		Additional Contributions	\$ _____	
Side Musician per Rehearsal \$ _____		Contractor And/Or Leader Rehearsal \$ _____		Amount Requested of MPTF	\$ _____	
				Grand Total of Costs For Performances	\$ _____	
Perf. No.	No. Of Musicians	Total Wages of Performance	Employee Pension Welfare	Transportation or Cartage Request	Total MPTF Cost For each performance	
1						
2						
3						
Perf. No.	Date of Perf.	Starting & Ending Time	Performance Location And <u>Full</u> Address		Leader/Group Name	For MPTF Use
1						
2						
3						

TYPE OF MUSIC (INDICATE PERFORMANCE NUMBER):