

# APPLICATION FOR CDNY CONCERT FUND SUPPORT

Please fill out the form below and email a copy to [concertfund@cdny.org](mailto:concertfund@cdny.org)

Subject line for email: Your Name: Concert Fund Application

*First name*

*Last name*

*Group name if applicable*

*Email*

*Phone*

*Mailing address*

*Street*

*Apartment*

*City and State*

*ZIP code*

*I have lost a significant part of my income because of COVID-19.*

*Yes*

*No*

*Concert title*

*Repertoire*

*Names of other performers*

*Instrumentation*

*Likely duration*

*Preferred platform*

*Tech help needed?*

*Yes*

*No*

*Schedule*

*Preferred date / time*

*2nd choice date / time*

*Comments / Questions*