



Surfers Paradise Alliance offices
Rooftop (level 3)
Surfers Paradise Transit Centre
10 Beach Road
Surfers Paradise QLD 4217
Open: Mon - Fri 8:30am – 5:00pm (ex public holidays)
Telephone: 5584 3700
Fax: 5538 8210
Internet: surfersparadise.com
Email: busking@surfersparadise.com

Broadbeach Alliance Ltd
Level 12
Nicon Plaza
Victoria Avenue
Broadbeach QLD 4218
Open: Mon - Fri 8:30am – 5:00pm (ex public holidays)
Telephone: 5539 8416
Fax: 5570 2655
Internet: broadbeachgoldcoast.com
Email: bma@broadbeachgoldcoast.com

Authorising Provision

Local Law No. 11
(Roads and Malls) 2008

Subordinate Local Law No. 11.1
(Interference with a Road) 2008

APPLICATION FOR A PERMIT TO BUSK

Please note the following:

- The Busking Application form must be completed and received by the closing date for the next permit period. Please refer to Surfers Paradise Alliance (SPA) and Broadbeach Alliance (BAL) websites for closing dates, or contact the respective offices by phone for details.
- Applicants successful in proceeding to an audition will be advised by phone.
- Applicants must bring to the audition any equipment used as part of their performance and photographic proof of identity.
- Each applicant must agree to have their photograph taken, which is used to record the buskers costume.
- Applicants will be judged against certain criteria and SPA and BAL may recommend to Council to approve or not approve an application. Feedback may be given upon request.
- Applicants will be advised in writing within ten (10) working days if they have been successful or unsuccessful.
- New performance will be required to complete a three month trial period

Collection Notice: Council requires the personal information requested on this form for the purpose of assessing your application and administering licenses and approvals in the city. The information will not be disclosed to any other party unless required by law

Please complete this application in **BLOCK LETTERS** and tick boxes where applicable.

PERSONAL DETAILS

Applicant name

First Name(s): _____

Surname: _____ Date of Birth: _____

Residential Address

Street: _____

Suburb: _____ State: _____ Postcode: _____

Postal address

Street: _____

Suburb: _____ State: _____ Postcode: _____

Contact details

Home Phone: _____ Work Phone: _____

Mobile Phone: _____

Email: _____

For 'Group Acts' each member must complete an application form. (please note: only one busking fee is charged per group act)

ACT DETAILS

Is your act a group or individual? _____ If group, how many members in the group? _____

What is the name of your group? (if applicable) _____ What is the name of your act? _____

Please provide a description of your performance, including any props/equipment used:

Have you previously been granted a Permit to Busk on the Gold Coast? **Yes** **No**
(If yes please detail any changes to your act since receiving the previous permit)

Will you use an amplifier for this performance? **Yes** **No**

(Note: only battery powered amplifiers are allowed)

Please select the type of performance from the list below:

- Vocals Dance Acoustic Guitar & Vocal Comedy
 Mime/Statue Juggling Contortionist One Man Band

Other (Please specify the type of performance) _____

Does your act involve any audience participation? **Yes** (if yes please detail) **No**

Are any animals involved in your performance? **Yes** (if yes please detail) **No**

Payment details
Please note busking fees are non refundable

BUSKING PERMIT FEE

Fee \$26.00 per month

3 month period \$78.00

up to 12 month period or part there of to 31 August 2011

- Fees are payable prior to the issue of a busking permit.

- Successful applicants will be advised of payment requirements and provided payment options.

Surfers Paradise (cheque, money order or direct debit)

Broadbeach (cheque or money order only)

BUSKERS DECLARATION

I, _____
(Please print full name)

of _____
(Please print residential address)

have read and declared that I understand the obligations and responsibilities as set out in the 'Busking Guidelines' which form part of the terms and conditions of this application.

Signature of Applicant(s): _____ Date: _____