



Haysville Fall Festival

Stage Act

REGISTRATION FORM

October 21—23, 2022 | 706 Sarah Lane, Haysville, KS

Applicant Name _____

Name of Act _____

Address _____

City _____ State _____ Zip _____

Telephone (____) _____ Cell (____) _____

Email _____

Preferred Date and Time _____

Special Instructions _____

Send application to **Haysville Fall Festival, P.O. Box 363, Haysville, KS 67060.**

Or Email form to Joni Sulanke—hrbjyo@gmail.com

Signature: _____

Date: _____