



THE PROVIDENCE FEDERATION OF MUSICIANS
Local 198-457, American Federation of Musicians
PROUDLY PRESENTS THE

Cavalcade of Bands



Rhodes-on-the-Pawtuxet
60 Rhodes Place
Cranston, RI 02905

“Remembering DUKE BELAIR”

Tuesday, October 19, 2021, 6:00 PM to 10:00 PM

Ballroom
M.C.: **Steve Bianchi**
(WBLQ, 1230 AM)

FOYER

M.C.: **Bill Melone**
(WRIU, 90.3 FM)

6:00	The Bill Moretti / Ginny Conley Group
6:45	The Duke Belaire Reunion Band (16 pc. Swing and Dance Orchestra), under the direction of Ray Belaire & Art Medeiros
7:45	The Bill Moretti / Ginny Conley Group
8:30	The Duke Belaire Reunion Band (16 pc. Swing and Dance Orchestra), under the direction of Ray Belaire & Art Medeiros
9:15	Special Awards Ceremony & 50/50 raffle
9:30	The Duke Belaire Reunion Band (16 pc. Swing and Dance Orchestra), under the direction of Ray Belaire & Art Medeiros

6:00	The Lois Vaughan Quartet, featuring Art Manchester , sax
6:45	Lloyd Kaplan & “The Aristocats”
7:30	The Diane Carey Group, with Kirk Feather , sax
8:15	The Shawnn Monteiro Group, with Mike Renzi , piano
9:00	The Bob & Jennifer Mainelli Group, with Mike Renzi , piano

Al DeAndrade
Program Chairman

NOTE: Band lineups, personnel and times are subject to change

Doors Open at 5:45 PM — Dancing 6:00 PM to 10:00 PM

Catering Services (6:00 - 9:00 PM) Provided by

The Catering Gourmet

TICKETS

(Check or Cash ONLY. No credit or debit purchases.)

Advance Purchase or Mail Order: \$20.00

At the Door: \$25.00

For Tickets / Table Reservations: Call **Rhodes** at (401) - 785 - 4333 or **Al** at (401) - 935 - 3739

To order tickets BY MAIL, complete the form below and return it, with your payment, to

The Providence Federation of Musicians



Ticket Mail Order Form

Return to:
Providence Federation of Musicians
172 Longfellow Street
Providence, RI 02907-2621

I would like to purchase ____ ticket(s) at \$20.00 per ticket.

Enclosed is my check in the amount of \$____.00,

made payable to: Providence Federation of Musicians.

(NOTE: No Credit or Debit Purchases available)

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

E-MAIL ADDRESS: _____

NOTE: This mail order form must be received by **FRIDAY, October 15th, 2021.**

Any mail order form received after that date will **NOT** be honored.

Typeset and printed in-house by Local 198-457