PERFORMANCE AGREEMENT

PRESENTER:
Name:
Address:
Telephone/Fax:
Email address:

INDIVIDUAL ARTIST or PERFORMING GROUP:
Name/ Group :
Address:
Telephone/Fax:
Email address:

PERFORMING GROUP CONTACT PERSON (IF DIFFERENT FROM ABOVE):
Name:
Address:
Telephone/Fax:
Email address:

EVENT TITLE:

PERFORMANCE LOCATION:

PERFORMANCE DAY(s)/ DATE (s) / TIME(s):
- The artist agrees to provide:
- The presenter agrees to provide:

PERFORMANCE FEE: $____

PLEASE MAKE OUR CHECK OUT TO:


ARTIST/REPRESENTATIVE:

Signature: ____________________________ Date: ____________

PRESENTER:

Signature: ____________________________ Date: ____________