



3 HUTTON CENTRE DR. SUITE 810
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OFFER SHEET

UPON APPROVAL BY MANAGEMENT, THIS OFFER REPRESENTS A BINDING AGREEMENT
* PLEASE INCLUDE A COVER LETTER EXPLAINING ALL DETAILS OF YOUR EVENT *

ARTIST : _____ PRIVATE/OPEN TO PUBLIC : _____
DATE OF SHOW : _____ TODAY'S DATE : _____
SHOW START : _____ DOORS OPEN : _____
PROMOTER CONTACT & PHONE: _____
PRODUCTION CONTACT & PHONE : _____
PURCHASER : _____
SIGNATORY : _____

Where contract will be mailed. (no P.O. Boxes)
ADDRESS : _____
CITY : _____ ST : _____ ZIP : _____
PHONE : _____ FAX : _____

E - Mail Address _____
VENUE : _____

CONTACT: _____
ADDRESS : _____
CITY : _____ ST : _____ ZIP : _____
PHONE : _____ FAX : _____

CAPACITY :		TICKET PRICE SCALING:	
#	_____	NUMBER ↔ PRICE	\$ _____
#	_____	NUMBER ↔ PRICE	\$ _____
#	_____	NUMBER ↔ PRICE	\$ _____

CONTRACT PRICE : _____
BILLING (Headline, opener, etc): _____
SOUND & LIGHTS : _____
SUPPORT TALENT (opening act): _____
OTHER PROVISIONS (meals, hotels): _____
MERCHANDISING DEAL (percentage): _____ Who Sells?: _____

Miles from prev. date : _____ Miles to next date : _____ Radio market : _____

AGENT : _____