## **Contract**

Client Signature

Date

## **Client Information:** Name: Address: Phone: Email: SOUTHERN VIRGINIA HARPIST **Event Information: Contact Information:** Date: Renée Hall **Event Location:** 4907 Lantern St. Address: Roanoke, VA 24019 **Time Schedule:** 540-818-4547 starcityharpist@gmail.com Start Time: www.southernvirginiaharpist.com **End Time: Venue Contact: Financial Information:** Name: Make checks payable to Renée Hall. Phone: Email: **Total Amount Due:** Deposit (non-refundable): 50.00 Balance Due: **Event Coordinator:** Name: Balance required 10 days prior to service. Phone: Email: This document is an offer and not a valid Referred by: contract until the deposit is received and Musician(s): accepted. Number of Guests: Notes: In order for us to provide you with and optimal performance, please note the following: When temperatures exceed 80 degrees, the instruments must be completely shaded. When temperatures drop below 65 degrees, a space heater must be provided for the musicians. The instruments cannot be exposed to rain, a mist system, or extreme weather conditions. If under any circumstance the musicians are unable to fulfill their contractual obligation, the fees paid shall be refunded or the musicians will do all that is reasonably possible to find a qualified substitute. By signing, I agree to the aforementioned terms

Renee Hall

Date