PERFORMANCE REQUEST FORM

Epic Steel Orchestra

Please email all requests to band manager Ashanti Gayden at: agayden@westpointsom.org

Contact Information

Name of Requestor: __________________________ Date of Request: ____________
Phone: ___________________________ (mobile) __________________________
Address: __________________________

Email Address: __________________________ Website: __________________________
Alternate Contact Name: __________________________ Phone: __________________________ (mobile) __________________________
Email Address: __________________________

Performance Information:

A minimum fee of $1800.00 for a one hour performance will be charged. A full set performance is equal to 45 minutes. A 15 minute break is required between sets.

Event Name: __________________________ Date: __________________________
Location: __________________________
City: __________________________ State: __________________________
Type of site (i.e. Park, Auditorium, etc.): __________________________
Event start time: ____________ Event end time: ____________
Performance start time: ____________ Performance end time: ____________
Type of Event: □ BLACK TIE AFFAIR □ FUNDRAISER □ POLITICAL EVENT
□ COMMUNITY EVENT □ FESTIVAL
□ CONCERT _____ Opening Act _____ Headliner
□ OTHER __________________________

Is the event open to the public: □ YES □ NO
Is there a fee or admission charge: □ YES □ NO If so, cost pp: __________________________
Explain purpose of performance: __________________________

VIP or special guests invited: __________________________

Estimated audience size: __________________________
Rain site location if needed: __________________________

Have other music performers been requested for this event? □ YES □ NO

Please note that these requests will be accepted or denied based on availability of the Orchestra. Send your requests as soon as you know the date/place/time and we will do our best to support your request.

Thank you for your cooperation.

For Office Use Only

Date: __________________________
□ Approved as submitted
□ Approved with modifications (see attached)
□ Denied
Contract due date: __________________________
Approved by: __________________________
Name: __________________________
Title: __________________________
Signature: __________________________