

## Club & Organization Contract Request Form

Student Activities Office

Parsons Union Building

Lock Haven University

2016-2017

### THIS IS NOT A CONTRACT

Information provided on this form will be used to create a contract! This request must be completed and submitted at least two weeks prior to the event.

#### **Requestor Information:**

Club/Organization Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Requestor Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Requestor Signature: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Purpose for the contract: \_\_\_\_\_

#### **Performer/Service Provider Information:**

Performer/Service Provider Name: \_\_\_\_\_

Agency: \_\_\_\_\_ Agency Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Agency Fax #: \_\_\_\_\_

\_\_\_\_\_ Agency Email: \_\_\_\_\_

#### **Performance Information:**

Date of Performance: \_\_\_\_\_ Time of Performance: \_\_\_\_\_

Location of Performance: \_\_\_\_\_ Performance Duration: \_\_\_\_\_

Performer Expected Arrival Time: \_\_\_\_\_

Have you reserved the facility?  Yes  No *(If no, you are responsible for reserving the facility prior to submitting this form.)*

#### **Budget Information:**

Negotiated Performance Fee: \$ \_\_\_\_\_

List Contract Inclusions (**check all that apply**):  Hotel  Travel  Meals  Other: \_\_\_\_\_

(Please attach a copy of all riders included with the contract)

What account will you use to pay for the performer?  Budget Account  Special Account

***\*Students & Advisors are NOT permitted to sign contracts!\****

Club President Signature: \_\_\_\_\_

Club Treasurer Signature: \_\_\_\_\_

Club Advisor Signature: \_\_\_\_\_

| Office Use Only:      |
|-----------------------|
| Date Received: _____  |
| Date Processed: _____ |
| Approved By: _____    |