



MARCO'LEARY

entertainment

Agreement for Entertainment Services

CLIENT

First Name:

Last Name:

Address:

City:

State:

Zip Code:

Phone: () -

E-Mail Address: @

EVENT DESCRIPTION

Type of Event:

Location:

Address:

City:

State:

Zip Code:

Phone: () -

Facility Contact:

Date of Event: / /

Start Time:

Finish:

Package Cost: \$

Retainer: \$

200.00

Must be returned with this agreement

Total: \$

Due upon completion of event

SIGNATURES

(This Agreement is Subject To the Terms and Conditions On the Reverse Side of This Document)

Marc O'Leary LLC / /

X

Purchaser/Client / /

X