## THEATRE & KIDS / ONSTAGE & OFF, INC.

## SUMMER CARAVAN ENGAGEMENT AGREEMENT 2019

Thank you for choosing to host us at your location!

Please look over this page and make sure all of the information is correct. If anything below is incorrect, please call our booking agent Lynn at 610-996-5968 or write us at <a href="mailto:onstageandoff@live.com">onstageandoff@live.com</a> and we will remedy the problem and send you a new copy immediately.

Organization Title  Contact Person  Venue Street Address				Performance Date & Time  Name of Show to be Performed  City, State, Zip		
			<u>.</u>			
			<del></del>			
Contact Phone	e Numbe	er		Approx. Audience Total	Age range	
performance of	day.	Two Performances at 30 minutes in between Other  month before performa	t the same loveen	ocation on different dates ocation on the same date e plan to pay the remaind	with approximately	
Our information We will be arr After the show and depart fro	on: iving wit v, which om your	is approximately one ho	oroximately lour, we will	# 23-3055727  one hour prior to your scl be happy to greet your a pefore we arrived. We us	udience in costume	
Agents, Will Li	egel / Lv	nn Schwartz		Date		

## SUMMER CARAVAN HOST QUESTIONNAIRE

Please complete this questionnaire and send it, along with payment or deposit (\$100 minimum), by one month prior to the performance date. If deposit is paid, remainder is due on performance date. If there are questions or concerns, please feel free to email us at wliegel@phil-mont.com

Does your audience have any previous theatre experience?							
Are there any activities planned for your audience directly after the show?							
Do you plan on having an after-show discussion or talk-back session?							
Please describe your performance area (classroom, stage area, outdoor pavilion, etc.)							
<ul> <li>Is there anything we need to know about finding your location? (Please note if there is a different address that should be entered into a GPS)</li> </ul>							
If there is more than one entrance to your facility, where should we enter?							
Who do we ask for when entering your facility?							
Enclosed, find \$Deposit or \$ Payment in full							
Please plan to pay the remainder of the fee on performance day. Make checks payable to On Stage & Off, Inc. – Tax ID/EIN # 23-3055727							
Signature of Hosting Agent Date							