Club & Organization Contract Request Form
Student Activities Office  Parsons Union Building  Lock Haven University
2015-2016

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: $__________

What account will you use to pay for the performer? _____Budget Account _____Special Account

List Contract Inclusions (check all that apply): _____Hotel _____Travel _____Meals _____Other: ___________

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

*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: ___________