Party/Event Music Information

Name: _____

Date and Time: _____ _____

Location:_____

Contact person: _____ Phone #: _____

Instruments Requested: _____

Total fee: _____ Deposit*: _____

(*A $100.00 non-refundable deposit must be made to hold the date and time of your event. Cancellations made 72 hours or less before your wedding will need to be paid in full.)

Music Selections

Styles of Music Requested: _____

Songs Requested:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Notes/Special Requests: