

# The Bands of Cathedral City High School

Gregory Whitmore, Director of Bands  
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## Performance Contract & Information

### Contract/Booking Agent

Today's Date: \_\_\_\_\_ Date of Event: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Contact Email: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### Performance Information

Event Title: \_\_\_\_\_

Performance Location: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Performance Start Time: \_\_\_\_\_

Performance Completion Time: \_\_\_\_\_

Performance Description: (Be specific as possible)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this a "surprise" performance? Yes\_\_\_ No\_\_\_

Are refreshments/meals provided for the musicians? Yes\_\_\_ No\_\_\_

If yes, please provide details \_\_\_\_\_

Is transportation provided? Yes\_\_\_ No\_\_\_

If yes, please provide details \_\_\_\_\_

\_\_\_\_\_

Will the CCHS Band Program receive a donation? Yes\_\_\_ No\_\_\_

If yes, please specify the amount of the donation \_\_\_\_\_

Please make check payable to: **CCHS Bands**  
**PLEASE COMPLETE AND FAX TO 760.770.0149 (ATTN: GREGG WHITMORE)... THANK YOU!!**