



Please fill out the information about your event. Once we receive it we will generate an invoice and send it to you via-email. At the time of approval of the invoice a deposit will be due to hold the time and date. **Save to desktop and then attach it to an email to: admin@festiveeffects.com**

**BOOKING FORM
FOR
ENTERTAINMENT**

Today's Date

How did you hear about us?

Billing Name

Planners Name

Billing Address

City • State • Zip

Phone

Cell Phone

E-Mail

Room/Shelter Name

outdoor event

Address

Rain or shine

City • State • Zip

Rain Date

Nearest cross street

Deposits will be due for both dates If the second date is not used the deposit will go toward the first date.

Event Contact

Cell Phone

Alternate Contact

Cell Phone

Type of Event

Event Date

Party Start Time

Event for

Age

Siblings

Type of Entertainment

of Performers

Performer(s) start time

Hours requested

Special instructions