## EDIFYING BEATS

## ENTERTAINMENT

CLIENT		
ADDRESS	CITY	ZIP
PHONE # ( ) E-MA	AIL	
TYPE OF EVENT	DATE	
LOCATION		
ADDRESS		
PHONE # ( )	# OF GUESTS	
START TIME END TIME WED	DDING CEREMONY yes	no N/A
EXTRAS CHOSEN		
MUSICAL GENRES DESIRED		
DJ's ATTIRE formal semi formal co	stume casual	
OVER TIME RATE PER HALF HOUR: \$ (after 4 ho	ours)	
SUB TOTAL \$ TRAVEL FEE \$		
DISCOUNT \$ DEPOSIT \$ Cash / Check #	(NSF checks wi	ill be subject to a \$30.00 fee)
BALANCE \$ Due no later than 7 days before event. Please initial to accept		
PERSON IN CHARGE OF FINAL BALANCE	CONTACT #-(	)
HOW DID YOU HEAR ABOUT US?		
	posit of 50% of total balance is received.	F *
Our mission as a "Responsible" DJ service is to promote positive, family friend mission will not be compromised under any circumstance. When signing this terms and conditions that are being stated to the undersigned client, you relibodily injury caused by any DJ equipment, and you make yourself responsi present at	s entertainment agreement for mobile disc joc ease <i>EB Entertainment</i> of being held liable t	ckey services, you agree to follow all for any type of property damage or
Client Signature		DATE
ED ENTERTAINMENT		DATE
EB ENTERTAINMENT		, DATE