

Missouri Square & Round Dance Festival Contract

Tentative Location:

SDC

RDC

S&RDC

Contact:

E-Mail:

Home Address:

City/State/ZIP:

Phone:

Phone:

Cell Phone for Emergency Contact on Dance Day/Night:

Caller

Cuer

Information

Name:

E-Mail:

Home Address:

City/State/ZIP:

Phone:

Phone:

Agreement

Day & Date of Dance (Day, Month, Day, Year): Start Time of Dance:

Location (Name of School, Hall, or Building): End Time of Dance:

Street Address:

City/State/ZIP:

The Dance Program Will Will Not Be Shared with Another Caller of Cuer.
(Person That Program Will be Shared with)

Sound Equipment Will Be Furnished By Missouri Federation. Please furnish your own microphone.

Program Will Be M/S Plus Advance Rounds Special Event

Rate Agreed To: Flat Fee: And/Or

Dance Program Information

Square Dance Program: Basic Mainstream Plus

Round Dance Program: Phase II (Easy) Phase III & IV (Intermediate) Phase V & VI (Advanced)

The parties identified above agree to the conditions stated in this contract agreement. It is further agreed and understood there are no other considerations or guarantees expressed or implied except as stated herein and that none shall lie recognized, and that this agreement may only be cancelled by mutual consent of the parties concerned.

I certify that I will be licensed to perform copyrighted music licensed by ASCAP & BMI at your club event.

..... (Caller/Cuer initial)

Missouri Federation Rep:

Caller/Cuer:

Date:

Date:

Instructions:

Fill in all blanks and check off all blocks that apply.
Caller and/or cuer must initial license certification if applicable.
Mo Fed representative and caller and / or cuer must sign.
Distribute copies as needed.
Include a map if caller or cuer does not have directions.
It is a good practice for the Rep to send a reminder to the caller or cuer at least One (1) year before the scheduled event