

Matthew M. Vacca



1730 KING AVENUE	STUDIO B	
COLUMBUS	OHIO	43212
PHONE	614.619.5778	
MATTHEW\_VACCA@YAHOO.COM		

**PERFORMANCE AGREEMENT:**

Client: \_\_\_\_\_ Event Date: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Type of Event: \_\_\_\_\_ Location: \_\_\_\_\_

Bride: \_\_\_\_\_ Groom: \_\_\_\_\_

Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

How many guests are you expecting? \_\_\_\_\_ When will they arrive? \_\_\_\_\_

Guest breakdown (by age): \_\_\_\_\_ 5-15yrs. \_\_\_\_\_ 16-24 \_\_\_\_\_ 25-34 \_\_\_\_\_ 35-44 \_\_\_\_\_ 45 & up

**Preferred Music Styles (circle your favorites):**

Oldies / Rock / Motown / Slow Dances / Country / Hip Hop / Jazz / Top 40 / Other: \_\_\_\_\_

**DJ Interaction:**

\_\_\_\_\_ Quiet (Just necessary announcements) \_\_\_\_\_ Average (Some Interaction) \_\_\_\_\_ Outgoing

**Other Event details / Special Instructions / Equipment Options:**

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

Non-Refundable Deposit: \_\_\_\_\_ Balance Due: \_\_\_\_\_

Final Payment Deadline: \_\_\_\_\_

*Your final balance payment for this contract is due **one month prior** to the date of your event unless stated otherwise.*

Final Cancellation Date: \_\_\_\_\_

*Where the Client cancels this Agreement after the final cancellation date (2 Weeks Prior) the undersigned Client will be required to pay any balances owing in full, with no refunds or returns.*

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Make Checks Payable to: **Matthew M. Vacca** - Return 1 copy of this contract with Deposit or Payment in Full.