

## **21<sup>st</sup> CENTURY PRODUCTIONS SERVICE AGREEMENT**

Thank you for choosing our services. Please take a moment to provide us with information regarding the event scheduled.

NAME OF CUSTOMER:

\_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_

TIME SCHEDULED SERVICE TO BEGIN: \_\_\_\_\_ AM/PM

TIME SCHEDULED SERVICE TO END: \_\_\_\_\_ AM/PM

NAME & ADDRESS OF EVENT LOCATION:

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

DETAILS/ADDITIONAL COMMENTS/SERVICES:

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

TOTAL AMOUNT DUE: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date