

Community Days 2022

THIS CONTRACT, entered on this ___20___ day of ___July 2022, is for the professional services of ___Paul Boggs Band_____ for the performance described below. The undersigned client and musicians agree, and contract as follows:

Parties

1. Band Name: Paul Boggs Band
2. Client Name: City of Charlestown, Marissa Knoebel
3. Client Address, Phone Number, Email: 304 Main Cross St., Charlestown, IN 47111, 812-256-3422 Parks@cityofcharlestown.com

Performance Details

4. Number of Musicians in Band: 4-5
5. Event: Community Days
6. Performance Venue Name: Charlestown City Square
7. Performance Venue Address: Short Street Charlestown, IN 47111
8. Performance Date: September 17, 2022
9. Performance Time: 12:30 to 2:00 PM

Payment Agreement

10. Payment: \$600.00 U.S. (the “Fee”). Sound/lighting equipment will be provided by the Client.

Additional Terms

12. This contract constitutes a complete and binding agreement between the client and band.

13. The undersigned parties agree to jointly and severally liable for the terms of this contract.

14. In the event of rain, or any other event which cancels the performance and is outside the control of either party, client and band agree to the following:

- If band’s equipment has not been loaded into the performance venue, band shall retain 50% of the agreed-upon fee, and no further payments shall be required by the client.

- If band’s equipment has been loaded into the performance venue, band shall retain the 50% deposit paid upon the signing of this contract, and client shall immediately pay band the full balance of the agreed upon fee.

15. The Band and its members, individually, assume any and all foreseeable risks associated with their musical performance, and hereby waive and release any claims against the client for loss resulting from such risks. Additionally, the Band agrees to indemnify and hold the client harmless for any loss to third parties as a result of any intentional or negligent action of the Band or its members.

CLIENT _____

BAND/MUSICIAN(S) _____