

VICTORIA ZETA FIVE

INFORMATION FORM

PLEASE RETURN THIS FORM WITH YOUR SIGNED CONTRACT. THANK YOU.

Artist Name VICTORIA & ZETA FIVE

Performance Date(s) _____ Time(s) _____

Venue Name _____

Venue Street Address _____

Name of person filling out this form _____

Your Phone # _____ Your Fax # _____

Setup/Rehearsal Time _____

Artist will have access to venue at what time _____ sound check time _____

Stage Size _____

If you have theater specifications, please return a copy with this form.

IMPORTANT PHONE NUMBERS

Person who booked the show _____

Person to notify upon arrival _____

Technical person (sound/lights) _____

Backstage contact _____

Box Office contact _____

Publicity person _____

In case of emergency contact number day of show _____

Where Artist may be reached at venue day of show _____

Address where record albums and artist merchandise can be shipped (a street address and phone number where someone is present between 9:00 a.m. and 5:00 p.m. weekdays)

Address: _____

Phone: _____

Please give directions to the performance location from a major highway. Add a separate sheet if more room is needed.

PLEASE PROVIDE A MAP OF THE LOCAL AREA
(Mark venue, parking, lodging, restaurant, etc. on map)

Recommended hotel(s) near performance location (name/address/phone number):

If you are providing lodging, please give name, address, and phone number of hotel:

Private lodging:

List any dinner arrangements or nearby restaurants, grocery stores or specialty markets.

Location:

Please recommend a local auto mechanic or dealer in case of emergency, or routine maintenance checkup:

Please list three (3) local radio and TV stations and contacts, phone numbers, addresses:

Please list local newspapers for interviews, calendar listings, press releases. Contacts, addresses, phone for individuals who deal with each type of service:

Please recommend a local (insert your special request, i.e., masseuse, guitar teacher, golf pro, etc.):
