

MITCH WOODS & HIS ROCKET 88'S
P.O. BOX 545 MILL VALLEY CA 94942 USA
PH: (415) 332-1882 FAX 415-332-5065
www.mitchwoods.com email: rocket88@gte.net

THIS CONTRACT FOR THE PERSONAL SERVICES OF MUSICIANS ON THE ENGAGEMENT DESCRIBED BELOW IS MADE THIS _____ DAY OF _____, 200__ BETWEEN THE UNDERSIGNED PURCHASER OF MUSIC AND THE UNDERSIGNED SELLER (MITCH WOODS & HIS ROCKET 88'S), FOR THE SERVICES OF: MITCH WOODS & HIS ROCKET 88'S WHOSE LEADER IS MITCH WOODS.

1. PLACE OF ENGAGEMENT: _____

2. DATE OF ENGAGEMENT: _____
3. SHOW TIMES: _____
4. LENGTH: _____
5. LOAD IN: _____
6. TYPE OF ENGAGEMENT: _____
7. COMPENSATION AGREED UPON: _____

TERMS

8. PURCHASER WILL MAKE PAYMENTS BY CERTIFIED CHECK, MONEY ORDER, BANK DRAFT, CASH, OR CHECK (SUBJECT TO APPROVAL BY MITCH WOODS), AS FOLLOWS:

A. \$ _____ SHALL BE PAID BY PURCHASER TO AND IN THE NAME OF MITCH WOODS FOR DEPOSIT UPON THE SIGNING OF THIS CONTRACT.

B. \$ _____ SHALL BE PAID BY PURCHASER TO AND IN THE NAME OF MITCH WOODS UNDER THE FOLLOWING CONDITIONS: _____

C. \$ _____ SHALL BE PAID BY PURCHASER TO AND IN THE NAME OF MITCH WOODS PRIOR TO THE START OF PERFORMANCE.

9. OTHER PROVISIONS: (SEE RIDER IF ATTACHED) _____

_____ DEPOSIT _____ DATE RECEIVED

10. ARTIST ENTER INTO THIS AGREEMENT AS AN INDEPENDENT CONTRACTOR AND NOT IN ANY WAY AS PURCHASER'S EMPLOYEE OR AGENT. IN CONNECTION THEREWITH, ARTIST SHALL HAVE SOLE EXCLUSIVE CONTROL OVER THE PRODUCTION, PRESENTATION AND PERFORMANCE OF THE ENGAGEMENT HEREUNDER. ARTIST'S OBLIGATIONS HEREUNDER ARE SUBJECT TO DETENTION OF PREVENTION BY SICKNESS, INABILITY TO PERFORM, ACCIDENT, MEANS OF TRANSPORTATION, ACTS OF GOD, AND ANY ACT SIMILAR OR DISSIMILAR BEYOND THE ARTIST'S CONTROL.

11. NO PERFORMANCE ON THE ENGAGEMENT SHALL BE RECORDED, REPRODUCED OR TRANSMITTED FROM THE PLACE OF PERFORMANCE, IN ANY MANNER OR BY ANY MEANS WHATSOEVER, IN THE ABSENCE OF A SPECIFIC WRITTEN AGREEMENT RELATING TO AND PERMITTING THE SAME.

RIDER FORMS, OF ATTACHED ARE PART OF THIS CONTRACT, DO NOT DETACH

IN WITNESS WHEREOF, THE PARTIES HERETO HAVE HEREUNTO SET THEIR NAMES ON THE DAY AND YEAR FIRST ABOVE WRITTEN.

PURCHASER

ARTIST

signature

name

MITCH WOODS

street address

P.O. BOX 545

city state

MILL VALLEY CA. 94942

phone fax

PH: 415-332-1882, FAX: 415-332-5065