

International Music Network - Offer Sheet

Ph: 978.283.2883 | Fax: 978.283.2330

Offer Date:	Offer Expiration:	IMN Agent:
Performance Date(s):	Alternate Dates:	
Artist/Project:		
Event Name:		
Event Type:	<i>Private/Concert/Corporate/Series/Festival/Etc.</i>	Other Acts on Bill/Support?

PURCHASER CONTACT INFORMATION

Company Name:		
Mailing Address:		
City:	State:	Zip:
Phone:	Fax:	Website:
Booking Contact:		
Email:	Mobile/Direct Line:	
Contract Signatory:		

VENUE INFORMATION

Venue Name:			
Address:			
City:	State:	Zip:	
Phone:	Fax:	Website:	
Capacity:	Venue Type:	<i>Concert Hall/Outdoors/Club/Theatre/Etc.</i>	Configuration:
Production Contact:		Marketing Contact:	
Email:		Email:	
Phone:		Phone:	

TERMS

Offered Fee:	<i>If offer is a percentage deal, please submit a separate income/expense document. This documentation may also be requested for other offers.</i>				
Production (Sound & Lights):	Yes	No	Details:		
Backline (Equipment Rental):	Yes	No	Details:		
Hotel Accommodations:	Yes	No	Details:		
Local Ground Transportation:	Yes	No	Details:		
Airfare/Travel:	Yes	No	Details:		
Backstage Hospitality:	Yes	No	Details:	Hot Meal Included?	Yes No
Number of Shows:			Show Time(s):		
Number Sets and Set Lengths:					
Exclusivity:	miles/kilometers (radius)		days prior	days post	
Merchandise Rates:	if Artist sells:		if Venue Sells:		
			Seller fee?	Yes	No Details:

Additional Activities:

Educational Activities/Master Class/Workshops Requested

An additional fee may be required

Ticket Prices and Scaling:	Gross Potential:
Local Fees?:	Local Tax?:
Comps?:	Net Potential:

Your offer will be reviewed by your IMN agent and is contingent upon deal term approval by the artist and IMN. Upon confirmation by the artist and IMN, a contract will be issued to Purchaser and the Purchaser agrees to abide by all terms and conditions on the contract and riders.

Submitted By: _____
Signature & Date