



# CONTRACT

Thank you for choosing Shadows of the Old West!  
The following information is to confirm the date, time and location  
of your event.

**PLEASE FILL OUT  
COMPLETELY AND RETURN.**

Name of **Contracting Party** or Organization:

Address of **Contracting Party**:

Exact Location Event is to be held (street address):

Date of Event \_\_\_\_\_ Type of Event: \_\_\_\_\_

Time of Event: \_\_\_\_\_

The **Contracting Party**, named above, agrees to pay \$ \_\_\_\_\_ (this amount includes performance fee and all travel expenses). We require a non-refundable deposit of 20% down (\$ \_\_\_\_\_ to confirm your booking date now. The balance of \$ \_\_\_\_\_ will be due at the time of our arrival to your event.

Please make checks payable to: *Shadows of the Old West*

**PROVISIONS to be provided by Contracting Party:**

Sound System \_\_\_\_\_  Arena with adequate fencing \_\_\_\_\_

Any Lighting \_\_\_\_\_

Motel Rooms \_\_\_\_\_  Camping or RV Facilities \_\_\_\_\_

Other (ie. Hay Bales, Crowd Control Barriers, etc.) \_\_\_\_\_

Any and all advertising or marketing of your event is the sole responsibility of the **Contracting Party**. *Shadows of the Old West* reserves the right to approve and may provide photographs to be used in said materials.

Please sign and return this contract, along with your deposit, to:

***Shadows of the Old West***

10230 40<sup>th</sup> Street West ~ Webster, Minnesota 55088

Your receipt of this contract, signed by a *Shadows of the Old West* representative, is your confirmation.

Contracting Party agrees to release *Shadows of the Old West* of any and all responsibility for any incidents or injuries to anyone attending this event. **SHADOWS OF THE OLD WEST** reserves the right to replace performers in case of accident, illness, or circumstances beyond our control causing inability to perform.

**SHADOWS OF THE OLD WEST** contract fee will be paid rain or shine at event and will perform rain or shine **but do** reserve the right to cease entertaining in the event of hazardous, threatening or dangerous conditions and accidents or circumstances beyond our control. In the case of a canceled event we may reschedule on a mutually agreed upon date unless otherwise noted.

24 hour event cancellation notice required. If *Shadows of the Old West* is enroute or on site of event full payment is expected.

**SHADOWS OF THE OLD WEST** may sell photos, music cd's, soaps, children's toys, ropes, t-shirts, etc. . . as circumstances and quantity allow. Performers are insured through:

AMERICAN FRONTIER REENACTMENT GUILD  
PAOLA, KANSAS 66071  
PH # 913-537-4459

I have fully read and understand the above and agree to be bound by it. Furthermore, I agree to not terminate this agreement except in writing to **Shadows of the Old West** at least 14 days prior to the scheduled date.

Signature of **Contracting Party**: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Signature of **Shadows of the Old West**: \_\_\_\_\_ **Date**: \_\_\_\_\_

10230 40<sup>th</sup> Street West ~ Webster, Minnesota 55088 ~ 952-250-2786