

# Corson Agency

Booking Request Form

Please return completed form to: [bookings@corsonagency.com](mailto:bookings@corsonagency.com)

Items highlighted in red are mandatory.

Date of Request:

Artist Requested:

Event Name:

Event Date:

Door Price:

Organization:

Contact Person:

Address:

City:

State:

Zip Code:

Country:

Phone / Mobile number:

Website:

E-mail:

Venue Name:

Venue Address:

City:

State:

Zip Code:

Venue Capacity:

Phone / Fax Number:

Website:

Time of Performance:

Duration of the Set:

Before the Artist:

After the Artist:

Exclusive:

Booking Fee Offer:

Extra Information: