<u>TRAVELER REQUEST FORM</u>

This form when signed by both parties will serve as an official contract

SUBMIT TO:Joanne AsmanORAsman & Associates, LLC1410 W. Morningside DriveBurbank, CA 91506(818) 842-8444 • Fax: (818) 842-8445e-mail: jsa@asmanj.com

Cynthia Brass Lyon Recreation Center USC University Park Los Angeles, CA 90089-2500 Tel: (213) 740-9252 Fax: (213) 740-1025 e-mail: brass@usc.edu

GROUP SPONSORING EVENT:

Contact Person:_____

(Name, address, phone, e-mail and or fax number)

Performance Time: From:______ to _____

Date(s) of Event:

Brief Description of Purpose and Program:

Location of Event:

What do you want Traveler to do?

Number of people Expected at the Event:		
Appearance Fee:\$1800_plus transportation \$	(\$500 Non Refun	dable Deposit with Booking.)
Final Payment (Due before Date of Appearance):	Cash Check	Credit Card
Card #	Exp Date:	3 Digit CVV #

**Signature of Requesting Party: ______

FOR COMMITTEE USE ONLY		
Joanne Asman's Approval: _	Date:	
Cynthia Brass Approval:	Date:	