

CAULDRON

RECORDS

MUSIC

Submit an Offer Form

Thank you for your interest in booking one of Cauldron Records artists. Please complete the following form, send it to us. We'll get back to you right away.

WHAT ARTIST WOULD YOU LIKE TO BOOK ?

YOUR NAME: _____

YOUR EMAIL: _____

PHONE NUMBER: _____

SHOW DATE: _____

VENUE/FESTIVAL NAME: _____

ADDRESS OF VENUE/FESTIVAL:

Address line 1: _____

Address line 2: _____

City: _____ State/Prov: _____

Country: _____

GUARANTEED FEE: _____

BONUS OR PERCENTAGE: _____

TOTAL CAPACITY: _____

TICKET PRICES: _____

COSTS: _____

SET TIME: _____

SET LENGTH: _____

SUPPORTS/OTHER ARTISTS: _____

WHEN DOES YOUR OFFER EXPIRES ? _____

OTHER SHOW DETAILS: _____

NAME: _____ **DATE:** _____ **SIGNATURE:** _____

Thank you very much for submitting your offer. Please scan the completed document and send it via email to cauldron.records@gmail.com

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