

# LEGS - LONGBEACH UKES ENTERTAINMENT GROUP

## BOOKING A 'LUKES' PERFORMANCE

Longbeach Ukes has a sub-group of performers known as LEGS - the LUKES Entertainment Group. 'LUKES' receives numerous requests to perform at Community events, Aged Retirement Facilities, Festivals & the like.

LUKES, as per any organisation, incurs regular overheads, such as PA equipment, utilities, insurances, etc. and therefore must seek a reasonable donation TO RECOVER COSTS for entertainment services provided.

Normally, the Club seeks a performance donation of \$120.00 to \$150.00 to balance ongoing expenses.

Some variation of the donation fee is possible, but subject to consultation, and confirmation by our Committee. Our LEGS group is growing in talent and would be delighted to perform for you. If you wish to book a date, please give us at least 30 days' notice.

Performance confirmation is subject to the availability of a group to perform on the preferred date/time.

Our Gig Co-ordinators can tailor a program to suit your audience or to celebrate a particular event or theme.

To enquire about a performance booking, please complete the attached form and return by email to:



[gigs@longbeachukes.com.au](mailto:gigs@longbeachukes.com.au)

Or phone Mandy: 0407 809 068

[www.longbeachukes.com.au/LEGS](http://www.longbeachukes.com.au/LEGS)

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## LEGS BOOKING FORM

Name of Organisation: \_\_\_\_\_

Performance: Date: \_\_\_\_\_ Day: \_\_\_\_\_

Time of Performance: Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

Most of our performances are 60 - 90 minutes. Plus half an hour set up time beforehand.

Your Venue Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

### Your Contact Details:

Job Title: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Numbers: Landline: (03) \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Will you be the contact on the day?: Yes  No

Has LUKES performed for you before?: Yes  No

Approximate size of room: Small  Medium  Large

Size of Stage area (if applicable): \_\_\_\_\_

Are power points in close vicinity to stage area?: Yes  No

Anticipated number in audience: \_\_\_\_\_

Any preferred types of music / special requests or occasions: \_\_\_\_\_

Is parking space for Group members available, or reserved on the day? Yes  No

If so please state specific location: \_\_\_\_\_

Door Security Code if applicable: \_\_\_\_\_

Anything else we should know?: \_\_\_\_\_

An invoice for the agreed fee will be issued after the performance.

We prefer payment by EFT within 7 days.

Your Purchase Order Number: \_\_\_\_\_

Your Accounts Payable Contact - Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_