Caller Confirmation Agreement

Club Name:	Town, St:,	
Date:	Start Time:	End Time:
CALLED INCORMATION	M-	Select Time Zone:
CALLER INFORMATION Name:		Email:@
Home Phone:	Cell	Phone:
Address:		
City, State, Zip: FEE:		
Special Considerations: (housing, travel, publicity, et	c.)
Alternate Contacts: (n	ame, phone, email)	
Name:	Phone:	Email:@
Name:	Phone:	Email: @
CLUB INFORMATION:		
Dance is: Club Dance Level: SSD MS	Special Dance Wor Plus A1 A2	kshop C1 Other
Dance Location:		
Club Contact:		Phone:
Club Contact:		Phone:
Dance Attendance:	☐ Open ☐ Closed C☐ None ☐ Cuer ☐ C	aller also Cues? Yes No
Add special tips (worksho	p a call, star tip, etc.)	
Sound Equipment furnish Refreshments Available:		Cuer Club ASCAP #:
Caller Signature:		Date:
Club Signature:		Date:

Notes: In consideration of the caller's health & fatigue, and to insure greater quality calling, CALLERLAB recommends that callers not be scheduled for more than a maximum of seven (7) hours in any one day. A reminder to the caller two weeks in advance of the event will be appreciated. This form is a version of the CALLERLAB form. COMPLETE IN DUPLICATE AND RETURN ONE COPY TO CLUB AND KEEP ONE FOR YOURSELF. (Revised July, 2023)