

# Hysteria Sound Music

Hysteria Sound  
P.O. Box 234  
Sullivan Mo 63080  
(Home) 573-468-7745 (Cell) 573-205-0702  
James & Stephanie Bartle

## **Rental Agreement / Contract**

### **Renter Information**

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

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

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

Mailing address: \_\_\_\_\_

Type of event: \_\_\_\_\_

Event date: \_\_\_\_\_

Event Location: \_\_\_\_\_

Event Time: From \_\_\_\_\_ To: \_\_\_\_\_

Music package includes **up to** 6 hours of Sound/Music  
**Additional hours are billed by the whole hour.**

Current rates are posted at <https://hysteriasounddj.com/dj-packages/>

**It is agreed the renter will render a NON-REFUNDABLE deposit of \$100.00 along with this completed and signed contract to reserve your event /date.**

### **Total Payment**

Sound/DJ \$ \_\_\_\_\_  
Additional hours above 6 \$ \_\_\_\_\_  
Ceremony Sound \$ \_\_\_\_\_  
Booking deposit \$ - \_\_\_\_\_  
**TOTAL PAYMENT DUE \$ \_\_\_\_\_**

**\*Total Payment is due on the day of the event if not paid in advance\***

**\*It is further agreed that in the case of illness, death, accident, or act of God, the seller reserves the right to cancel the above-mentioned agreement. \***

**\*It is also agreed that if any legal action is taken, the renter will render payment for all costs for collection, including attorney's fees and court cost. \***

***\*If guest become unruly and/or destructive to our equipment Hysteria Sound has the right to end the contract early at the renter's expense. Full payment will be required\****

***\*Renter will be held financially responsible for any damage or destruction of equipment example Mic Drop, liquid damage, or anything that leaves equipment non-functional\****

***\*5% Service charge for debit/credit transactions\****

**\*There will be an additional service charge of \$30.00 for any insufficient funds checks\***

***Contract MUST be signed by the Renter and mailed to Hysteria Sound along with deposit to reserve above date.***

**I, \_\_\_\_\_ (the renter) agree to all above obligations.**

**Renter Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Deposit: Cash \$ \_\_\_\_\_ Check \$ \_\_\_\_\_ Ck # \_\_\_\_\_**

**TOTAL PAYMENT DUE MUST BE PAID ON EVENT DATE OR BEFORE.**