

# Magic Show Contract: Agreement

Rick's Magic / Dr. H P.O. Box 93238 Lubbock, Texas 79493  
806-438-4856 Cell [www.RicksMagic.com](http://www.RicksMagic.com)

This legal agreement is made and entered into this day \_\_\_\_\_, **20** between  
Ricks Magic and ( \_\_\_\_\_ ) Hiring Agent: \_\_\_\_\_  
Hiring agent full name: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Hiring agent cell#: \_\_\_\_\_ Alt-# : \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Corp. Office Phone: \_\_\_\_\_ Fax#: \_\_\_\_\_

-----  
**Perform Address:** \_\_\_\_\_  
**Perform City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Date Of Show:** \_\_\_\_\_ **Unload and Set Up Time:** \_\_\_\_\_  
**Show Time:** \_\_\_\_\_ **Length of show:** \_\_\_\_\_  
**Performer will perform the services described below:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **APPROVED AUTHORIZED FEES AND EXPENSES:**

**Per Show:** \$ \_\_\_\_\_ **# of Shows:** \_\_\_\_\_ = **Total price of shows:** \$ \_\_\_\_\_  
**Mileage:** \$ \_\_\_\_\_ **Lodging:** \$ \_\_\_\_\_ **Meals:** \$ \_\_\_\_\_  
**Airfare:** \$ \_\_\_\_\_ **(Taxi Fee):** \$ \_\_\_\_\_  
**Misc.** \$ \_\_\_\_\_ **Prepaid Retainer Fee:** \$ \_\_\_\_\_  
**Amount due upon arrival \$** \_\_\_\_\_ **TOTAL to be paid to Dr H \$** \_\_\_\_\_

**How payment should be made:** It is understood that the undersigned will make final payment in full to Dr H. upon the performer's arrival. A 50% nonrefundable retainer will be provided by hiring party with contract in order to secure said performance(s) and show date(s). If for some reason the performer is not able to fulfill this agreement, because of his own doings, then a full refund of the said retainer will be refunded. **Cancellations:** Must be agreed by both parties with a minimum of 30 days written notice sent by registered US mail.

**Additional Invoice(s) req'd:** \_\_\_\_\_ yes \_\_\_\_\_ No

Theme: \_\_\_\_\_ N/A \_\_\_\_\_

**Performer:** Dr Rickey Honea **dba:** Ricks Magic (RicksMagic.com)

X Dr Rickey Honea \_\_\_\_\_ Date: \_\_\_\_\_

**(Signature/ or Authorized Representative – Hiring agent)**

X \_\_\_\_\_ Today's Date: \_\_\_\_\_

(Print name here: \_\_\_\_\_ ) Cell number: \_\_\_\_\_

**Additional Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_