6331241932

FESTIVALS AND SIMILAR EVENTS

Rate Schedule and Statement of Licensee's Operating Policy

ASCAP

Account Number: ☐☐☐☐☐☐☐☐ Premise Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

EVENT SPONSER OR ORGANIZER:_____
EVENT NAME:_____
EVENT LOCATION:_____
EVENT WAS HELD: FROM._____ TO:_____
TOTAL NUMBER OF EVENT DAYS:_____

PLEASE COMPLETE THE FOLLOWING FOR EACH DAY AN EVENT WAS HELD:

	CAPACITY	**DAILY LICENSE FEE**
DAY 1	_____	$_____
DAY 2	_____	$_____
DAY 3	_____	$_____
DAY 4	_____	$_____
DAY 5	_____	$_____
DAY 6	_____	$_____

ADD DAILY FEES TO ARRIVE AT THE TOTAL AMOUNT DUE: $☐☐☐☐☐☐☐☐.☐☐

Rate Schedule

CAPACITY (AS SPECIFIED BY LOCAL FIRE CODE)	**DAILY LICENSE FEE**
Up to 6,000 persons	$ 50.00
6,001 to 12,000 persons	$ 75.00
12,001 to 25,000 persons	$100.00
25,001 persons and above	$150.00

The above Rate Schedule covers the use of live and mechanical music in conjunction with each event. However, it is not applicable to musical events (such as live concerts or dances) presented before of after the event. In such circumstances, ASCAP's Concert Rate Schedule shall apply.

DISCOUNTS: A discount of 20% may be deducted from the above license fees for payment for each event in excess of twenty-five performed by LICENSEE during the contract year or any renewal term thereof.

SPECIFY QUARTER(S) WITH NO EVENT(S): ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th Year: ☐☐☐☐

SPECIFY QUARTER(S) WITH NO EVENT(S): ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th Year: ☐☐☐☐

SPECIFY OTHER QUARTERS: ☐

Contact Person & Title ☐☐

Phone Number: ☐☐☐ - ☐☐☐ - ☐☐☐☐ Ext: ☐☐☐☐☐ Fax Number: ☐☐☐ - ☐☐☐ - ☐☐☐☐

Email: ☐ Website: ☐

I certify the above information is true and correct.

Dated: ☐☐ / ☐☐ / ☐☐☐☐ Signature: ☐

ASCAP, 2675 Paces Ferry Rd. SE, Suite 350, Atlanta GA 30339-3913 1-800-505-4052 770-805-3475 (FAX)
Epayment Websites: http://www.ascap.com/gls_web or http://www.ascap.com

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