Instructions: Print this form out, fill in the blanks, sign it, so	can it, and return it to us via en	nail or US Postal Ser	vice. (Address below)
Thank you for calling on Steve Mings, CB entertainment needs.	A, AKA "Mr. Fun" and 0	C.F.Menzies for	all your event
For your convenience we have set up this needed information and send it to us by em		letter. Print ou	t this letter, fill in the
Entertainment requested: Balloon Creation	ons	rt 🔲 Balloon D	ÉCOT (Choose one or more)
Date or your event:	. Entertainment Timing	: From	to
Name of the location:			
The address of your event is			
City	State	Zip Code	
Your Company Name:			
Company Billing Address:			
City State	•	Zip Code _	<del></del>
To better serve you we will need two phone	e numbers that we can	contact you on	the day of the event.
The contact phone # is ()	and	(	
Helpful information would be to know: (Nan	ne of the event)		
Theme (If any)			
Estimate # of Children Estim	ate total # of guests inv	vited	_(children & adults)
Event Contact's Name:			
Special Instructions:			
Payment is to be made prior to or at the ti this letter will incur a \$50.00 dollar late fee. any outstanding balance that remains on the in cash or company check, Visa, MasterCa arrangements. No personal checks will be balance owed in cash or company check. Permits, Parking Fees and/or Entrance fee Make your Check or Money Order out to: Company check.	A 15% interest will be nis account, compounded accepted on the day of the Entertainers do not carros is the responsibility of the compound of	applied 30 daysed monthly. Pay Express. Call the the event. Ple by any change.	s after event date to yments can be paid he office to make hase have the correct Any License Fees, or organization. haveballoons.com
 Signature	Date		
We appreciate your business and we interthrough our special art form. Feel free to ca			-
Office Notes:	Sincerely,	Steve Mings, CE 909 986-1699 steve@gottahav	

Date:

**Event Information Letter:**