

# Event Service Agreement



Date: \_\_\_\_\_

Parties:

“Alpaca Owners” A Simpler Time

Name: Barbara Davies

Address: 1802 Alta Pl.

City, State, Zip: El Cajon, CA 92021

Telephone: 619 579-9114

Individual Requesting Event Service:

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

Type of Event: \_\_\_\_\_

Address of event: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Time: Alpaca owners agree to have 2 alpacas at said event on \_\_\_\_\_ (date)

From \_\_\_\_\_ (arrival time) to \_\_\_\_\_ (departure time).

Price: The parties have agreed upon the price of \$300 for the first hour and \$150 every hour after that. Additional transport fees will apply for venues outside of our local event area.

The cost for this event will be: \_\_\_\_\_. A 25% non-refundable deposit of \_\_\_\_\_ will be paid initially to reserve the date, with the remaining balance due prior to date of service.

Alpaca Owner Signature

Event Requestor Signature

\_\_\_\_\_

\_\_\_\_\_