

COAT CHECK SERVICE AGREEMENT

Contact Name:

Contact Phone Number:

Contact Email Address:

Show/Event:

Name of Event Manager:

Venue Name:

Date of Event:

Coat Check Hours of Operation Day 1:

Coat Check Hours of Operation Day 2:

Coat Check Hours of Operation Day 3:

Coat Check Hours of Operation Day 4:

Which of the following services are you inquiring about?

- Hosted Coat Check
- Attendee Paid Coat Check
- DIY Coat Check
- Sponsored Coat Check
- Themed Coat Check
- The VIP Express