

SkyTracker Southeast

(770) 457-6711

(866) 260-3549 fax



SKYTRACKER SEARCHLIGHT DISPLAY AGREEMENT

Date: _____

Contract # : _____

Lessee: _____

Site: _____

Contact: _____

Site Contact: _____

Telephone # : _____

Fax # : _____

Site: _____

Event Dates: _____

Email: _____

Rental Terms

Unit Type: _____

Rate: _____

Payment Method

Number of Units: One

Tax: _____

Cash

Display Hours: 4 hours TBD

Delivery: _____

Certified Check

Charge for overtime usage is \$195.00 per hour.

Per Diem: _____

Money Order

Operator: no

Other: _____

Company Check

Booking Agent: Brett Wilcox

Sub Total: _____

See Credit Card Authorization Form

Agent Office: Atlanta

Deposit: _____

No Personal Checks Accepted

Balance Due:

Balance is due upon delivery to site.

NOTES: Agreement cannot be canceled. Unit is not reserved until agreement is faxed back to SkyTracker. Payment is **MANDATORY** on delivery before lights are turned on.

Deposit is NON REFUNDABLE. See Terms and Conditions for additional information.

LESSEE AUTHORIZED SIGNATURE

SKYTRACKER AUTHORIZED SIGNATURE

Signature _____

Signature _____

Title _____

Title _____

Date _____

Date _____

Regional Administration

1092 West Atlanta Street, SE, Suite 300, Marietta, GA 30060