



THE MESSAGE (TM.) BOOKINGS ENQUIRY FORM

Please fill out the form below to receive more information and a quotation on the performance you are interested in. We will do our best to get back to you within one working day. Email form to themessageministry@gmail.com or Fax it to [0866970767](tel:0866970767)

CLIENT DETAILS

Name _____
Company _____
Email _____
Telephone / Mobile _____

EVENT DETAILS

Date _____
Alternative Date _____
Event Time _____
Venue Name _____
Area (e.g. City/Province) _____

Type of Event (tick whichever is relevant for your requirements)

| | | | |
|------------------------------|--------------------------|-------------------------------------|--------------------------|
| Church Music Programs | <input type="checkbox"/> | Revivals & Crusades | <input type="checkbox"/> |
| Church Service | <input type="checkbox"/> | Praise and Worship Services | <input type="checkbox"/> |
| Music Concerts | <input type="checkbox"/> | Special Events | <input type="checkbox"/> |
| Week of Prayers | <input type="checkbox"/> | Birthday Celebration Parties | <input type="checkbox"/> |
| Church Programs | <input type="checkbox"/> | Special Days Celebrations | <input type="checkbox"/> |
| Wedding Celebrations | <input type="checkbox"/> | Corporate Functions | <input type="checkbox"/> |
| Funeral Services | <input type="checkbox"/> | Music Extravaganza | <input type="checkbox"/> |

Number of guests expected (i.e. Estimate number of People to be sung too)

Demographics of guest (e.g. Average age, gender, race, industry, ect.)

Additional comments/ relevant event information (e.g. Wedding Music for Ceremony Only/ Ceremony and pre-meal drinks/ Pre-meal drinks/ Reception/ ect.)

Estimate Duration of the Event (e.g. 2 Hour, 4 Hours ect)

Number of Musical Items (Songs) required to be sung (please tick your indication below)

| | | | | | |
|----------------|--------------------------|----------------|--------------------------|-----------------|--------------------------|
| 5-Songs | <input type="checkbox"/> | 7-Songs | <input type="checkbox"/> | 10-Songs | <input type="checkbox"/> |
|----------------|--------------------------|----------------|--------------------------|-----------------|--------------------------|

Approximate budget (i.e. Please give us an indication for precise costing quotation, please tick)

| | |
|--|--------------------------|
| Less than R3000.00 | <input type="checkbox"/> |
| R3000.00 – R10 000.00 | <input type="checkbox"/> |
| R10 000.00 – R30 000.00 | <input type="checkbox"/> |
| Not Sure yet, just getting an idea of Costing | <input type="checkbox"/> |

All Performance is done with a good PA Sound System. (Please tick applicable option below)

| | | | |
|--|--------------------------|--|--------------------------|
| Yes, we will Organize PA System | <input type="checkbox"/> | No, Please Organize PA System for our Account | <input type="checkbox"/> |
|--|--------------------------|--|--------------------------|

(Note: if PA system will be Organized by Client, please check with TM Music director for Tech Rider)

Any Specific song titles by name required for your function

1. _____
2. _____

Additional Comments/ request
