



Reginald R. Woods President & CEO
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Overtime/Balance Authorization Agreement

*****Overtime is per HOUR over the ending time*****

Name: _____ **Balance Pick Up:** _____
Phone: _____
Date of Event: _____
Over-time Amount:\$0,000.00..... **PER HOUR OR PART THEREOF.**
Balance Amount: \$ _____ **(Band Leader please fill in)**

(Cash or Certified Check ONLY. If personal check, client MUST fill out this Credit Card Authorization Form)

Payable By: Visa MasterCard American Express

I HEREBY AUTHORIZE WOODY WOODS WORKIN' MUSIC LLC TO CHARGE MY CREDIT CARD IN THE AMOUNT OF \$ _____ FOR THE OVERTIME/BALANCE PICK UP AT MY AFFAIR.

THIS SECTION MUST BE FILLED IN COMPLETELY

Card Number: _____ Expiration Date: _____
Security Code on Back of Card: _____
Card Holders Name: _____
Card Holders Address: _____
Card Holders Phone: _____
CARDHOLDER'S SIGNATURE: _____ **Date:** _____

Woody Woods Workin' Music LLC
Representative: _____
I have reviewed all of the terms and conditions out lined on the back of the Woody Woods Workin' Music LLC CONTRACT and I agree not to utilize the dispute process made available by my credit card company to settle any problems that I may have with the quality of service provided by Woody Woods Workin' Music LLC

**228 Hancock Street
Brooklyn, NY, 11216-2126**