

Cadence

Worship Band

Rider to be attached to and made part of the contract dated _____, 2009, for the city of _____ between **Cadence** (hereinafter referred to as **Artist**) and _____ (hereinafter referred to as **Purchaser**).

This rider is part of your contract with **Cadence**. We simply believe we serve a God of excellence and, therefore, wish to count the cost in preparing exhaustively to honor Him and minister effectively in His name with this event. The rider is designed to alert the sponsor as to the artist's expectations, needs, and requirements, and to answer any questions that will help make the event a success in the eyes of God, the artist, crew, yourself, and every person that attends the event.

Your event is not confirmed to be requested until this rider is either mailed, emailed, or faxed to Cadence at:

Cadence

252 N.W. 35th Street

Boca Raton, FL 33431

561.376.6731 ph/ 561.391.1939 fax

booking@cadenceworship.com

(a ministry of Victory Christian Center)

Please note and understand: It is understood and agreed that if anything needs to be altered to this rider, please contact **Cadence** through:

Contacts:

Jamie Ortiz

(561) 376-6731 cell

jamielortiz@gmail.com

Matthew Puchferran

(561) 866-1593

mpuchferran@gmail.com

Please Read Carefully, and use as a checklist

www.cadenceworship.com

Personnel

- _____1). **Cadence** usually travels with up to Ten (10) people. **Cadence Manager** will provide the specific number of persons expected for your date.

Accommodations

- _____2). **Purchaser** agrees that if an overnight stay is needed, that accommodations will be provided.
 ***Accommodations can take the form of three (3) hotel rooms or staying at house(s) of individual(s) involved with the event. If at all possible, please provide free wireless internet access for band business needs. ***

Merchandising

- _____3). **Purchaser** will provide **two (2) tables**, eight (8) feet in length or less to be placed in a well-lit area near the main entrance of the venue for merchandise sales. In addition, please provide **two (2)** responsible persons (preferably over the age of 16) to sell merchandise. Merchandise sellers should arrive at least fifteen (15) minutes prior to the opening of doors for instruction on the selling procedures.
- _____3a). **Purchaser** understands that all proceeds from the sales of **Artists** Merchandise will go to **Artist**. If any venue/merch fees are requested, please make sure that it is written out and sent with the signed rider.

Load-in/Setup

- _____4). **Artist** will need to have One and a half (1 ½) hours set aside for load-in and setup combined.

Sound Check

- _____5). **Artist** must be guaranteed a complete sound check prior to the admittance of the audience for the event

Insurance

- _____6). **Purchaser** is responsible for maintaining all necessary liability insurance for this event. A certificate naming Victory Christian Center as additional insured should be faxed or mailed to the manager no later than 15 days prior to the event date. **Cadence** and/or anyone else related to the band shall not assume responsibility for any injury or damage to any equipment (not owned by the band), property, or persons, related or not, to the show herein contracted. Any cost related to shall be the responsibility of the **Purchaser**.

Meals and Hospitality

- _____7). The meals that will be requested from the **Artist** will be determined by the time of the event. At most, the **Artist** will request Lunch and Dinner to be provided by **Purchaser**. This can be either home cooked meals or purchased.
- _____7a). **Purchaser** will need to provide Ten (10) cold waters for the day, including sound check. In addition, we will need four (4) cold waters and three (3) room temperature waters on stage.

Payment

- _____8) Please make checks out to Victory Christian Center, as the **Artist** is a ministry of this church.

Cadence

Production Rider

Sound

-Cadence does

-It is understood that at this moment the **Artist** does not travel with Sound System including; Sound Board, Amplifiers, and Speakers.

-Fly-Dates will require Backline and sound system be provided.

Technician

We will require a qualified audio technician to be responsible for the system and available to assist our FOH engineer for the duration of the event. **Cadence** will bring an audio engineer who will run the Front-of-House console during **Cadence's** portion of the event.

| | Input Name | Type of Input |
|----|----------------|-----------------------------|
| 1 | - Click | - Direct Box |
| 2 | - Kick | - AKG D112 or Equivalent |
| 3 | - Snare- Top | - SM 57 |
| | Snare- | |
| 4 | Bottom | SM 57 |
| 5 | - Hi-hat | - SM 57 |
| 6 | - Tom | - Audix A2 |
| 8 | - Floor Tom | - Audix A4 |
| 9 | - O/H | - |
| 10 | - O/H | - |
| 11 | - Bass | - Direct Box |
| 12 | - Elec. | - SM 57 |
| 13 | - Elec. 2 | - SM 57 |
| 14 | - Accoustic | - Direct Box |
| 15 | - Accoustic 2 | - Direct Box |
| 16 | - Keys L | - Direct Box |
| 17 | - Keys R | - Direct Box |
| | Andrew | |
| 18 | - Vocals | - Beta 58 |
| 19 | - Donny Vocals | - Beta 87A |
| 2- | - Britt Vocals | - Beta 87A |
| | | Preferably a TC Electronics |
| 21 | - Vocal EFX | - M-One |
| | Vocal Delay- | |
| 22 | - EFX | - Anything with a Tap Delay |

Outputs From Board

| | | |
|---|-----------------|---|
| 4 | - Monitor Sends | - We Use Shure In-Ears and travel with Full In-Ear System |
|---|-----------------|---|

Sound System-

Please have whoever is in charge of the sound system contact Jamie Ortiz @ (561)376-6731 to discuss what is needed for the event.

Cadence

EVENT INFORMATION "HOT" SHEET

Event Date: _____ **Start Time:** _____

Purchaser: _____

Purchaser Address: _____

Contact Name: _____

Work: _____

Fax: _____

Cell: _____

Venue: _____ **Precise Capacity:** _____

Mailing Address: _____

Shipping Address: _____

Venue Phone: _____ Venue Fax: _____

Venue Type: theater () gym () church () other: _____

Time Available for Load in: _____ Sound Check: _____

Accommodations: _____

Address: _____

Shipping Address: _____

Phone: _____ Fax: _____

Confirmed Date(s) of stay: _____

Confirmation # (if hotel): _____

Name Reserved under: _____

*****PLEASE MAKE CHECKS OUT TO VICTORY CHRISTIAN CENTER*****

PLEASE FORWARD DIRECTIONS TO THE VENUE AND ACCOMMODATIONS VIA EMAIL TO BAND MANAGER

booking@cadenceworship.com

www.cadenceworship.com