



The Office of Student Activities  
Founders Hall - E103  
(P) 973-684-7191  
[osa@pccc.edu](mailto:osa@pccc.edu)

**Return to:**  
**Office of Student Activities**  
Founders Hall - E103

### PERFORMANCE AGREEMENT

For and in consideration of the sum of \$\_\_\_\_\_ the undersigned (Performer, Speaker, Artist, hereafter referred to as “Artist”) herein agrees to perform as follows:

First & Last Name of Performer:

\_\_\_\_\_

Title of Performance:

\_\_\_\_\_

Description of Performance:

\_\_\_\_\_

Date of Performance:

\_\_\_\_\_

Time of Performance:

\_\_\_\_\_

Place of Performance:

\_\_\_\_\_

Upon full and faith performance as recited above, the Office of Student Activities of Passaic County Community College of New Jersey herein agrees to pay to said artist by a Passaic County Community College check the sum of \$\_\_\_\_\_.

The parties herein expressly agree and acknowledge that this agreement shall not be enforceable against the Office of Student Activities or any associated student organization of Passaic County Community College of New Jersey unless said agreement is executed by the Director of Student Activities of Passaic County Community College of New Jersey.

*All contracts must receive final approval by the Vice President for Finance & Administration.*



This agreement contains the sole and entire agreement between the parties. Any waiver or modification of the same must be effectuated in writing and signed by the parties.

Additional provisions: (a rider may be attached for signing)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_

Make check payable to: \_\_\_\_\_

Telephone # \_\_\_\_\_

Fed. I.D./Soc. Sec. # \_\_\_\_\_

\_\_\_\_\_  
**Performer/Artist Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Director of Student Activities**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Sharon Goldstein**  
**Dean for Student Affairs**

\_\_\_\_\_  
**Jacqueline Kineavy**  
**VP Academic / Student Affairs**

\_\_\_\_\_  
**Steven Hardy**  
**VP Finance & Administration**

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