



HANLON
ENTERTAINMENT
& VOICEOVER

Name:

Contact Number:

Email:

Type of Voiceover (Can be discussed):

Male or Female Voice (or a mix):

Overall atmosphere of recording:

Music behind script? If yes, describe style:

Any other info: (E.g. How would you like to receive the recording? Cd, flash stick etc)

Please attach script to the booking form. If you need help with what to put in your script we can help you with ideas and content.

Payment Details:

Deposit: Paid: \$_____ x _____

Owing: \$_____ x _____

(A 20% non-refundable deposit is due at the time of booking. Full payment is due prior to release of recording.)

HANLON ENTERTAINMENT AND VOICEOVER

Contact Details:

Phone: 0409 479 390

Email: entertainment@shoalhaven.net.au

