

Stage Design Consultation Agreement

Date: _____

Client Name: _____

Client Address: _____

Email: _____

Phone: _____

Consultant Information

Consultant Name: _____

Consultant Address: _____

Email: _____

Phone: _____

Scope of Services

The Consultant agrees to provide the following services:

- Initial consultation to discuss design vision and requirements.
- Proposal of design concepts and layouts.
- Site visits and adjustments based on feedback.
- Final design plan and coordination with installation team.

Fees and Payment

The total fee for the above services shall be: \$_____.

Payment schedule is as follows: _____.

Timeline

The consultation and design process is expected to be completed by: _____.

Confidentiality

Both parties agree to maintain confidentiality regarding any proprietary information exchanged during the consultation.

Acceptance

By signing below, both parties agree to the terms outlined in this agreement.

Client Signature: _____ Date: _____

Consultant Signature: _____ Date: _____