



**THEATRE UTILIZATION
REQUEST FORM**

CONTACT PERSON _____
 NAME OF ORGANIZATION _____
 ADDRESS _____
 PHONE (H) _____ (W) _____ email _____ Cell _____
 PURPOSE OF REQUEST _____
 DATE(S) REQUESTED: MOVE IN DATE: _____ MOVE OUT DATE: _____
 PRE-EVENT TIME (occupy time): _____ EVENT START TIME: _____
 EVENT CONCLUSION TIME: _____ STRIKE CONCLUSION TIME (MOVE OUT COMPLETE) _____
 NUMBER OF ATTENDEES: _____

SPECIAL NEEDS (BE SPECIFIC):

EXPLANATION

THEATRE EQUIPMENT:

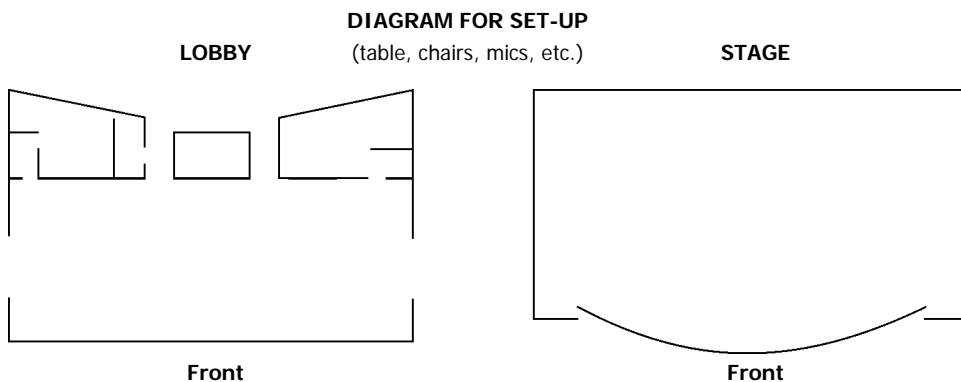
Projection Screen (Ceiling) (VGA or S-cable connection only) _____
 Control Room Video _____
 Microphone(s) (Standing or Floor) _____
 Microphone Stands _____
 Lighting _____

LRC AUDIO/VIDEO:

Power Point
 Television
 Projector Screen (Portable)

OTHER:

Internet/Login Information
 Podium w/mic
 Lapel mic/wireless
 Flip Chart
 White Board
 Piano (Grand or Upright)
 Tables (6'-8')
 Chairs
 Other _____



FEE AND OTHER APPROVALS: APPROVED BY ADMINISTRATION ONLY

TECHNICIAN(S) REQUIRED: YES NO FEE: _____ FEE WAIVER APPROVED BY ADMINISTRATION: _____
SECURITY REQUIRED: YES NO FEE: _____ FEE WAIVER APPROVED BY ADMINISTRATION: _____
THEATRE FEE: YES NO FEE: _____
INSURANCE REQUIRED: YES NO APPROVED BY: _____
 Permission to bring food into the facility (LOBBY ONLY) APPROVED BY: _____

- ☞ **This application must be completed and signed in order to secure a use of the facility. No guarantees of special set-up or electronic equipment will be made to those persons filing this application less than ten (10) working days in advance.**
- ☞ **Payment of fees is required upon notification of approval by the Office of the Vice President for Business Affairs.**
- ☞ **ABSOLUTELY NO FOOD OR BEVERAGES ARE ALLOWED INSIDE THE THEATRE. (Water permissible)**
- ☞ **If any problems occur, please contact the on-duty Security cell phone at 934-4923 between 8:00 am - 10:00 pm.**
- ☞ **Alcohol is prohibited unless written approval is received in advance by the President.**
- ☞ **Any manipulation of sound and lighting equipment is prohibited and will incur additional charges and possible refusal of future bookings.**

Permission to provide or serve alcohol (LOBBY ONLY)

APPROVED BY: _____

LICENSED VENDOR: _____
 (must be licensed to serve alcohol during this event)

Applicant Signature _____ Date _____

Vice President for Business Affairs _____ Date _____

Theatre personnel _____ Date _____

Interactive Video Coordinator _____ Date _____