

Rene M. Caisse Memorial Theatre
Rental Application

Contact Information:

Name of Applicant: _____

Name of Organization: _____

Home Phone: _____ Work Phone: _____ Fax: _____

Street Address: _____ City/Town: _____

Postal Code: _____ Email: _____

Fee Level: Commercial Non-Profit Ticketed Non-Ticketed

Event Information

Event Name: _____

Event Description: _____

Liability Insurance Required Liability Insurance already purchased
Proof of insurance attached

Facilities Needed

Theatre Lobby for Reception Dressing Rooms Green Room

<i>Date</i>	<i>Start Time</i>	<i>End Time</i>	<i>Price</i>

Equipment Requirements

Lighting. Lighting can be used but no changes to hang or focus.
 Sound: Mic Mic Stand Other requirements: _____
 Piano Piano with tuning (extra charge)

Staffing Requirements (1 Technician required on site at all times)

Lighting Technician Spotlight Operator
 Sound Technician House Manager
 Ticket Takers Ushers

DATE _____ APPLICANT'S SIGNATURE _____