

Booking Request Questionnaire

We look forward to quoting your event and preparing the necessary paperwork rent the facility. In order to begin the process, we need to understand more about your organization and the event that we will be hosting. Please complete the following:

References

New clients must provide two references from other facilities where rental has occurred previously.

Reference One	Reference Two
Venue Name:	Venue Name:
Venue Contact:	Venue Contact:
Contact Phone:	Contact Phone:
Organization Details	
Organizationor	Non-profit: Proof of Washington State non-profit or 501(c)3 status must be provided to receive the discounted rate.
Person Requesting:	Event Contact:
Contact Phone:	Contact Email:
Billing Address:	City: State: Zip Code:
Event Details	
Event Name:	Date(s) Requested:
Arrival Time(s):	Departure Time(s):
Show(s) Start Time:	Show Length:
Intermission: Duration:	
Front-of-house	
Lobby Concessions: Please Describe: Coffee, tea, and light snacks only. All concession items must have prior approval from the theater manager.	
Lobby Sales: Please Describe:	
Ticketing Agency:	Ticket Price(s):
Reserved Seating: General Admission:	
Technical Needs Please include as many details as possible. These should include any audio, video, light we realize not all of this may be finalized, the more we can anticipate, the better we contain the contained of the property of the contained of the contai	ting, rigging, staging or special equipment requests (e.g. Piano, PowerPoint, DVD, Choral Risers, etc.). While an serve your needs. Please attach additional pages if necessary.