



DOWNEY CIVIC THEATRE RENTAL INFORMATION REQUEST

Please print or type:

| | | |
|------------------------------------------|-------------------------|-----------------|
| Name: | | Date: |
| Group/Organization you are representing: | | |
| Who should checks be made payable to?: | | |
| Address: | | City/State/Zip: |
| Phone: () | Alternate Phone: () | |
| Fax: () | Email Address: | |

IMPORTANT: This is only a Rental Information Request and does not secure a requested date. No date will be held until rental application is returned and approved and is secured with \$600 use deposit.

Please list any date(s) you would like to rent the Theatre. Please specify all rehearsal dates and performance dates:

Please Check all that apply to your event:

- | | |
|------------------------------------|------------------------------------------|
| <input type="checkbox"/> Dance | <input type="checkbox"/> Play |
| <input type="checkbox"/> Choral | <input type="checkbox"/> Musical Theatre |
| <input type="checkbox"/> Orchestra | <input type="checkbox"/> Concert |
| | <input type="checkbox"/> Other: _____ |

| REFERENCES | |
|--------------------------------------------|--------------|
| Please list three Venue Rental references. | |
| 1.Venue | Contact Name |
| Address | Phone |
| 2.Venue | Contact Name |
| Address | Phone |
| 3.Venue | Contact Name |
| Address | Phone |

Signature of Applicant:

Date:

FOR OFFICE USE ONLY

Use Deposit Received: _____ Check Number: _____ Amount: _____ Staff Initials: _____
Approved Date of Performance: _____