

**Booking Request Form**

(PLEASE USE ONE REQUEST FORM PER EVENT)

Organization: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name of Event: \_\_\_\_\_

**PREFERRED CHOICE**

Date(s) of Event:	
Load-in, Rehearsal and Load-out dates if needed:	
Theatre:	

**SECOND CHOICE**

Date(s) of Event:	
Load-in, Rehearsal and Load-out dates if needed:	
Theatre:	

**THIRD CHOICE**

Date(s) of Event:	
Load-in, Rehearsal and Load-out dates if needed:	
Theatre:	