



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

Venue Name:	_____
Venue Contact:	_____
Contact Phone:	_____

Reference Two

Venue Name:	_____
Venue Contact:	_____
Contact Phone:	_____

Organization Details

Organization or Person Requesting:	_____
Contact Phone:	_____
Billing Address:	_____

Non-profit: ☐ *Proof of Washington State non-profit or 501(c)3 status must be provided to receive the discounted rate.*

Event Contact:	_____				
Contact Email:	_____				
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: _____	Anticipated Attendance: _____	Number of Performers: _____

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, lighting, rigging, staging or special equipment requests (e.g. Piano, PowerPoint, DVD, Choral Risers, etc.). While we realize not all of this may be finalized, the more we can anticipate, the better we can serve your needs. Please attach additional pages if necessary.

