

# APPALACHIAN THEATRE VENUE REQUEST FORM

## Event Sponsor/Presenter Details:

Name of Host Organization:		Non-profit Organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Event Contact:		Contact Email:	
Contact Cell Phone #:		Phone for event Info inquiries:	
Organization Address:			

## Event Details:

Name of Event:			
Venue(s) Requested:	<input type="checkbox"/> Theatre <input type="checkbox"/> Community Room <input type="checkbox"/> Lobby	Estimated Attendance:	
1 <sup>st</sup> Choice for Event Date(s):		Showtime or Event Start/End:	
2 <sup>nd</sup> Choice for Event Date(s):		Showtime or Event Start/End:	
Type of Event:			
Will this Event be Ticketed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure		
Ticket Price(s):			

## List two other venues and contacts where you have presented similar events:

Venue, Date & Event:		Contact Name & Phone #:	
Venue, Date & Event:		Contact Name & Phone #:	

## Anticipated Equipment Needs *(these can change, just give a general idea)*

Amplification	<input type="checkbox"/> Yes <input type="checkbox"/> No	Additional details or questions:
Piano	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Projection	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Special Lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Podium	<input type="checkbox"/> Yes <input type="checkbox"/> No	
# Mics		
# Tables		
# Chairs		

*Please note: A non-refundable \$150/day deposit is required to hold all dates. Advertising and ticket sales cannot begin until this request is approved and all required deposits received.*

**Please submit request via email to: [slivesay@apptheatre.org](mailto:slivesay@apptheatre.org) or mail to Appalachian Theatre, PO Box 11 DTS, Boone, NC 28607**