



Request for Use/Facility Use Agreement

GROUP INFORMATION

Event Title:

Organization
(Group):

Mailing Address:

City

St

Zip

Contact Name:

Phone:

E-mail

Type of Entity:

501(c)(3) Nonprofit

Government

Commerical/Corporate

Individual/Private Party

EVENT INFORMATION

Event Date

Start Time

End Time

Event Purpose

Number Attending

Time Needing
Access to Facility

AM

PM

Admission Charged?

Y

If yes, ticket price?

N

Rooms requested:

Auditorium

Stage

Main Lobby

Dressing Rooms

Backstage Area

Box Office

Equipment
Requests:

Concert Piano
2nd Follow Spot
Lobby Piano

Follow Spot
Digital Movie Projector
Theatrical Lighting

Banquet Tables:

Cocktail
Tables:

Wireless
Lavalier
Microphones:

Wireless Handheld
Microphones:

Wired
Microphones:

Sound
Monitors:

FOOD & BEVERAGE

Request to have
food & beverage
provided:

Full Concessions
Candy Only
Bar Service

Popcorn Only
Beverages Only
Margarita/Frozen Drinks

Please contact me
for catering quote:

Yes, please do.

On behalf of my group/organization, I agree to pay all fees and additional expenses for services associated with the use of Twilight Theatre facilities; I will adhere to the Twilight Theatre's rules and procedures, and I agree to Twilight Theatre Facility Use terms and conditions (attached).

Group Representative
(PRINT)

Date

Group Representative Signature _____

Special Requests/
Additional Comments

FOR TWILIGHT THEATRE INTERNAL USE

Approved by Executive
Director

Salesperson _____

Executive Director Signature _____ Date _____