

Robson Performing Arts Center Facility Use Request Form

Please check only one: District Non-Profit Educational Other Non-Profit Commercial

Event Title / Performance Name

Sponsoring Organization Performance open to the public?

Address City State Zip Code

Contact Name Contact Phone Number

Expected (per performance) Email Address FAX Number

***All individuals and organizations should use this form for request. Please use a separate form for each event.**

Event	Date (mm/dd/yy)	Arrival Time	Curtain Time	Ending Time	Departure Time

Facilities Needed (Please check all that are required)

<input type="checkbox"/> Main Theatre	<input type="checkbox"/> Make-Up Room	<input type="checkbox"/> Loading Dock	<input type="checkbox"/> Lobby	<input type="checkbox"/> Ensemble Room
<input type="checkbox"/> Black Box Theatre	<input type="checkbox"/> Dressing Rooms	<input type="checkbox"/> Scene Shop	<input type="checkbox"/> Kitchenette	<input type="checkbox"/> Other <input type="text"/>

Equipment Rental (Please enter total number needed; refer to rate sheet for pricing)

Upright Piano <input type="text"/>	Orchestra Shells <input type="text"/>	Mic w/ Stand <input type="text"/>	Body Mic <input type="text"/>	Chairs <input type="text"/>
Grand Piano <input type="text"/>	Choral Risers <input type="text"/>	Lectern w/ Mic <input type="text"/>	Digital Projector <input type="text"/>	Chair Set-up <input type="text"/>
Follow Spot <input type="text"/>	Music Stands <input type="text"/>	Cordless Mic <input type="text"/>	Projection Screen <input type="text"/>	Table (8' X 2 1/2') <input type="text"/>

Technicians For Hire (Only RPAC trained personnel may operate equipment)

<input type="checkbox"/> Sound Board Operator	<input type="checkbox"/> Light Board Operator	Follow Spot Operator <input type="text"/>	Stage Grip (Fly) <input type="text"/>	Ushers <input type="text"/>
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Please Select Yes or No

Will the sound be used? <input type="text"/>	Will prerecorded sound be used? <input type="text"/>	Will special lighting effects be needed? <input type="text"/>	Will tickets be sold in our box office or online? <input type="text"/>
Will merchandise be sold? <input type="text"/>	Will flames or weapons be used? <input type="text"/>	Will admission be charged? <input type="text"/>	Ticket Pricing: (Orchestra and/or Balcony) <input type="text"/>

I, the undersigned, do affirm that I have read the regulations pertaining to the use of the RPAC facilities and hereby agree to comply with the rules and regulations of the Claremore School District governing the use of such facilities and further agree to be responsible for any damages that may occur to the facilities during such use. I understand that any charges are to be paid in advance or upon presentation of an invoice. Additionally, I understand any special services or accommodations required by Section 504 of the Rehabilitation Act (including all associated amendments) for any participants, officials, spectators, workers, volunteers, and employees of the lessee will be the full responsibility of the lessee.

Signature Date

Accepted Denied
 Accepted as Amended RPAC Executive Director Date