

ALAMEDA OPEN AIR THEATRE



BOOKING FORM

Reception / Function (other than stage performance)

Name of Group / Organisation:
Address:
Telephone / Mobile No.
E-mail :

For Invoice Purposes:
Contact name:
Address:
Telephone / Mobile No.
E-mail:

Type of function (please state if sit-down or standing only etc.)
.....
.....
.....

Number of guests:

Date of Function:
Additional dates for access and removal (if any)

Table / chair requirements (if any)
Please state if these will be provided by client

Other areas requested:
Molly Bloom
Other (*please state*)

Equipment:
Sound equipment required Yes / No (*please tick*)
Generic Lighting equipment required Yes / No (*please tick*)

Approved Operator: Name:.....

Bar Service required: Yes / No (*please tick*)

Any other requests:
.....
.....

Signed for the Client

Signed on behalf of the Theatre

Name: (*in Block Capital*).....

Name: (*in Block Capital*)