

ALAMEDA OPEN AIR THEATRE



BOOKING FORM
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 performance (musical, beauty contest, drama, concert, etc)
Total Dates requested From To
Dates of performance(s) From To
Dates of rehearsals requiring lights From To
Date of Get-in
Date of Get-out

Seating requirements: *(please tick where appropriate)*
Large Terrace Small Terrace Upper Patio Lower Patio AA, BB, CC

Stage requirements for Judges: Tables *(amount)* Chairs *(amount)*
If other, please state:

Sound Equipment required: Yes / No *(please tick)*
Approved Operator: Name:

Generic Lighting Equipment: Yes / No *(please tick)*
Approved Operator: Name:

If yes, please specify number below:
Profiles *(please state quantity up to 6)*
MAC 250s *(please state quantity up to 3)*
Follow Spots *(please state quantity up to 2)*

Other areas requested:
Molly Bloom Circle (for V.I.P. drinks) Yes / No *(please tick)*
Waiter Service (£45.00) Yes / No *(please tick)*
Other request (please state)

Signed for the Client

Signed on behalf of the Theatre

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

Name: *(in Block Capital)*