

# Lakeville Area Arts Center - Facility Request

CCT, TPTT, EXP: Request due by January 31 for upcoming playbill (Annually September to August) and will be approved randomly after due date.

Name of Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of Organization: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Show/Event Title: \_\_\_\_\_ Ticket Prices (If Sold by LAAC): \_\_\_\_\_

Date/Year	Purpose (Rehearsal, Tech, Show, etc)	Room(s) (Art, Theater, Lobby, Kitchen)	Arrival Time	Show Time	Approx. End Time	LAAC Tech Need? Arrival Time?

**Audio/Lighting/Technical Requests:**

**Room Set-Up** (Tables, Chairs, Etc):

**Theater Seating:**  Cabaret  Theater **Stage Extension:**  None  4Ft  8Ft  Other \_\_\_\_\_

**Special Requests:**

**Box Office Required:**  Yes  No

**Concession Sales Requested:**  Yes  No

**Bar Service Requested:**  Yes Dates: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  No