



# Tryon Fine Arts Center

## Rental Information Form

### I. Renter

Name/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Website: \_\_\_\_\_

Name of Contact: \_\_\_\_\_ Phone: Cell: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### II. Event Information

Event Title: \_\_\_\_\_

Date: \_\_\_\_\_ Start time \_\_\_\_\_ Approximate End time \_\_\_\_\_

TFAC Space: \_\_\_\_\_

Type of Event: Please choose the description that best describes your event.

\_\_\_ Multi Day Full Production with rehearsals, lighting cues, sound cues, scenery, flys, etc.

\_\_\_ Single Day Production with lighting, sound, sound-check, load-in/load-out

\_\_\_ Recital with no special lighting, simply lights up, lights down

\_\_\_ Lecture/Workshop with speaker at lectern, slide presentation

\_\_\_ Festival with multiple performances

\_\_\_ Other (please describe): \_\_\_\_\_

### III. Event Schedule

Rehearsals needed: \_\_\_ Yes How many? \_\_\_ \_\_\_ No

Load-in/Set-Up – (begins with *FIRST* access to the theater) notes: \_\_\_\_\_

Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Rehearsals/Tech –proposed rehearsal and tech schedule

Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

### IV. Additional Information

Intermission: \_\_\_ Yes \_\_\_ No Start time & length of Intermission. \_\_\_\_\_

Filming Event \_\_\_ Yes \_\_\_ No Confirm legal permission.

Piano Use: \_\_\_ Yes \_\_\_ No