



RENTAL APPLICATION

Please return completed application to:
 Maria Sahakian, Marketing & Events Manager
 116 West California Ave., Glendale, CA 91203
 Tel: (818) 243-2611 ext. 16 Fax: (818) 241-2089

Licensing Agreement Information:*Please Print Clearly*

| | | | |
|--|------|---|---------------------|
| Title of Event | | Date(s) | Time(s) |
| Producer / Organization | | | |
| Mailing Address – Street / Post Office Box | | | Suite / Apt. Number |
| City | | State | Zip Code |
| Federal ID or Social Security Number | | Are you a nonprofit 501(c)3 corporation? <input type="checkbox"/> Yes* <input type="checkbox"/> No | Web Site Address |
| Person Signing the Agreement | Name | | Title |

* Must provide a copy of your Internal Revenue Service 501(c)3 Acceptance Letter 1045

Contact Information:

| | | | | |
|----------------------------|---------------|-----|--------------|-------|
| Primary Contact | Name | | Title | |
| Phone | Evening Phone | Fax | Cell / Pager | Email |
| Ticket Information | Name | | Title | |
| Phone | Evening Phone | Fax | Cell / Pager | Email |
| Marketing/Publicity | Name | | Title | |
| Phone | Evening Phone | Fax | Cell / Pager | Email |
| Technical | Name | | Title | |
| Phone | Evening Phone | Fax | Cell / Pager | Email |

Event Information:

| | | |
|--|---|---|
| Description of Event | | |
| Type of Event: <input type="checkbox"/> Concert <input type="checkbox"/> Musical <input type="checkbox"/> Drama <input type="checkbox"/> Comedy <input type="checkbox"/> Meeting <input type="checkbox"/> Dance <input type="checkbox"/> Other: | | |
| Is this a ticketed event? <input type="checkbox"/> Yes <input type="checkbox"/> No | Seating: <input type="checkbox"/> Reserved <input type="checkbox"/> General Admission | Is event open to public? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Approx. Length of Performance: hr min | Will there be an intermission? * <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, how many? <input type="checkbox"/> One <input type="checkbox"/> Two |
| Anticipated Attendance: | Suitable Ages: <input type="checkbox"/> Any Age <input type="checkbox"/> 6 Yrs Old + <input type="checkbox"/> 18 Yrs Old + <input type="checkbox"/> Adults Only | |
| Will you be filming/taping your event? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Is photo/video recording by patrons allowed? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Will merchandise be sold? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, Merchandise Contact: _____ Tel: _____ | |
| Will you have a reception at the theatre? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: <input type="checkbox"/> Before performance <input type="checkbox"/> After performance <input type="checkbox"/> Catered <input type="checkbox"/> Alcohol | | |

* The Licensing Agreement requires that performances will have an intermission of at least twenty (20) minutes in duration unless otherwise agreed to in writing by the Alex Theatre.

Event Settlement Information:

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|--|--|
| How do you want to receive your settlement paperwork? <input type="checkbox"/> Mail <input type="checkbox"/> Pick up from Alex Theatre Office | If pick-up, name of individual authorized to receive settlement package: |
|--|--|