



ARTS EDUCATION PROGRAM EVENT REQUEST FORM

This event request form may be returned to the Arts Education Program at the Grand Theatre Center for the Arts, 715 Central Ave, Tracy. For questions, please call the Arts Education Coordinator at (209) 831-6279.

Please Note: Events held outside of assigned class time/classrooms are subject to Grand Staff approval and facility availability. In some cases you may be asked to rent the space and/or equipment at the Grand.

INSTRUCTOR INFORMATION

Name: _____ Date: _____

Address: _____

Phone & Email: _____

How many events are you proposing to offer in the next session? _____

(Please complete a separate form for each)

EVENT INFORMATION

Course/Workshop Title: _____

Date for desired event: _____

Time for desired event: _____

Will this event take place during class time? _____

Room(s) at the Grand requested: _____

FEES

Will Students be charged additional expenses in conjunction with the concluding event (costuming, supplies, or the expenses)? _____ If yes, additional amount per student: _____

Will ticket admission be charged for this event? _____ If yes, ticket price: _____

PARTICIPANTS

Number of student participants for this event: _____

Will you have any aids or assistants helping with this event? _____

Have these aids/assistants been fingerprinted and cleared by the Tracy Police Department? _____

Names or aids/assistants: _____

What audience numbers do you estimate for this event? _____

TECHNICAL NEEDS

Please describe your technical needs for this event:

Lights: _____

Sound (including microphones, amplification, playback or recorded music, etc): _____

Dressing room space: _____

Other Needs: _____

Please share any additional notes about your proposed event here: _____

<i>Staff Use Only</i>		
Received: _____	Approved / Denied	Date: _____
Facility: _____		