ACT Rehearsal/Performance Room Booking Contract

1400 Summit Ave Suite E Plano TX 75074

972-881-3228

ACT is a 501 C -3 nonprofit community theatre with a 90 seat auditorium. Once this contract is submitted there are no refunds or cancellations. If you wish to charge your date,

there is $50 fee to change the date and is subject to availability. If we cannot accommodate a change there will be no refunds due to cancellations by those booking the event.

# Event name and duration (including set up and load out – IE 2 hours):

Responsible Parties Names :

Primary contact number/Address/email:

Event Day(s), Date(s) & Time(s):

Number of persons attending and requested room ID for those attending:

Theatre Rate is $\_200 or $50 for two hours $10 or $50 for each additional hour: Totaling:$\_\_\_\_\_\_\_\_\_\_\_\_\_

Tables Needed ($5 rental per table): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chairs Needed ($1 per chair):\_\_\_\_\_\_\_\_\_

Other equipment requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @\_\_\_\_\_\_\_\_\_ =$\_\_\_\_\_\_\_\_\_\_\_\_\_

TECH OPERATOR (2 hour minnimum @$35 an hour)

*Please initial below that you understand the following:*

*This contract along with deposit must be returned at least 2 weeks before the event to ensure booking. ACT requires $100 non-refundable deposit to hold the date and room, additionally half the cost of the rental is also due 2 weeks prior to booking.*

 *This rate is for a 2 hour usage unless otherwise indicated, If the workshop must hold for late-comers additional time will not be added. The start time is when the workshop has been so scheduled. To hold the booking deposit must be made at least 2 weeks before the event. Remainder of the balance is due the day before the workshop begins, at lates. Please make checks out to ACT. Tipping your staff is encouraged. There are no cancellations. Rooms are as is. If the room or its contents are damages the deposit will be withheld and additional costs may be incurred. Also if you wish to add other services or items to your party please indicate below and add those amounts to your initial deposit check. This contract must be returned with you deposit to hold the room.*

*\_\_\_\_\_\_\_\_I do / do not (please indicate by circling) wish to add $25 clean-up and set up fee to have an ACT staff member present for the 2 hours use that I am here. I understand that if I go over the 2 hour period the cost o the staff member will be an additional $10 per hour.*

*I UNDERSTAND AGREE TO ALL THE ABOVE STIPULATIONS AND SPECIFICATIONS. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*