

Grace Chapel and Performing Arts Center
Reservation Request

Name of Organization _____

Name of Contact _____

Mailing Address _____ City _____ State _____ Zip _____

Phone Number _____ Fax Number _____ Cell Number _____

Email Address _____

Use: Day _____ Date: _____ Time: _____

Will any rehearsals be required? Yes No

If so what day of week, date, and time? Day _____ Date _____ Time _____

Production Needs

Sound: Mics __#__ Instruments that need electronic hookups __#__

 Monitors __#__

Lighting: Work Lights (Located on the Platform – Self-service)

 Stage Lighting Yes No

 Spotlight Yes No

 House Lights: Yes No

 House Lights Dimmed or controlled at points during the event Yes No

Media: Video Projectors Yes No

 Computer Projection Yes No

Sound Technician: Yes No

Lighting Technician: Yes No

Media Technician: Yes No

Additional Needs

Piano _____ Yes No

Acoustic Shell _____ Yes No

This request MUST be submitted at least 2 weeks in advance along with the signed GPAC USE GUIDELINES in order for the various needs to be met.

When you hit submit, this form will go to Rebecca Moreau. She will notify you by e-mail if your request has been approved or not-accepted.

Please specify additional information:

Date Approved: _____

Rebecca Moreau: _____ (initials)

Final Approval Date: _____

Steve Reibsome: _____