



Today's Date: _____

EXTERNAL SUPPLEMENTAL FACILITY REQUEST

Organization Name: _____ Contact Name: _____

Contact E-Mail: _____ Telephone: _____

Billing Address: _____

City: _____ Zip: _____

Event Title & Description: _____

# Attendees _____	# Spectators _____
Type of Event:	Public Private
Class or Club Event:	Yes No
Food at Event:	Yes No
Fresh & Natural Cater:	Yes No
Admission Fee:	_____
Registration Fee:	_____
Proceeds Used For:	_____

PLEASE INCLUDE ANY REHEARSAL TIMES ON THE SCHEDULE

DAY OF WEEK	MONTH/DATE/YEAR	ENTRY TIME	EVENT TIME	EXIT TIME

CHECK IF A LAYOUT DIAGRAM OR ADDITIONAL INFORMATION IS ATTACHED

<p><u>PERFORMANCE</u> Main Theater Black Box Amphitheater w/Electricity Dressing Rooms 4000 Lobby Box Office Concession Stand Green Room</p> <p><u>LECTURE/CLASS/MEETING</u> 2420 801 Main Theater Black Box 1726 Conference Room Room: _____ Room: _____ Room: _____ Other: _____</p>	<p><u>ATHLETICS</u> Gymnasium Volleyball Nets: # _____ Basketball Hoops: # _____ Bleachers: 1 side 2 sides Clock: Portable Main Cover Floor w/mats Locker Rooms Concession Stand Synthetic Field w/Lights* Instr Pool (1) Comp Pool (2) Pool Lights* Hot Tub Pool House Restrooms Track Track Field Lights* Field House Restrooms Athletic Details: _____ _____ _____ * Lights - Time on: _____</p>	<p><u>TECHNICAL REQUIREMENTS:</u> Lights: House Special Drape: Open Close Moveable Microphone: # _____ Type _____ Sound System Screen Projector Laptop Piano: Steinway Grand Upright Technical Details: _____ _____ _____</p> <p><u>BASIC REQUIREMENTS</u> Podium Lectern # _____ Tables # _____ Chairs # _____ Trash Cans # _____ Canopies Location of Tables/Chairs: _____ _____ _____</p>
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WEEKEND RESTROOM LOCATION: _____ **RESTROOM CHECK REQUIRED:** YES NO

SIGNATURES: (By Signing This Request, the Applicant Agrees to Abide by the LPC Facilities Use Policy)

Requester _____ Date: _____

Administrative Services Department/Sheri Moore _____ Date: _____

INTERNAL USE ONLY

Walk-Thru Required: Yes No Date of Walk-Thru: _____
 Cert. of Liability Rcvd: _____ Date Formal Confirmation: _____
 Banner # _____ Theater/IT Support Provided By: _____

Perf. Arts: D. Miller V. Ball T. Lish C. Rosefield M. Rinaldi C. Hornbaker	Athletics: D. Miller M. Hargiss B. Eddy J. Santos	Other: _____
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