

Will there be videotaping during your event/production? (please circle)

YES

NO

If YES, for what purpose: _____

MARQUEE *located above the entrance to the Hermosa Beach Community Theatre*

- YES** If available, I do request the use of the Hermosa Beach Playhouse Marquee, for an additional fee of \$50. Marquee information will be put up as soon as the previous group exits the theatre.
Please complete the attached form for marquee information (page 3).
- NO** I will not be using the theatre marquee for my production.

FOOD AND ALCOHOL

Do you plan to sell food in the theatre lobby? <i>(must be pre-packaged)</i>	YES	NO
If non-profit, do you wish to apply for an ABC License to serve alcohol?	YES	NO

ADDITIONAL EQUIPMENT REQUESTS *(additional fees apply)*

Do you plan to use the cyclorama?	YES	NO
Do you plan to use the piano (baby grand)?	YES	NO
Do you plan to use the projector and screen?	YES	NO

SPECIAL ACCOMMODATIONS SUBJECT TO APPROVAL *(please check that you have read and understand)*

- I understand that all requests for equipment, backdrops, placement of sets, props, changes to the stage in any way, etc. must be received in writing and authorized by the Recreation Supervisor **two weeks** prior to installation.*

THEATRE USE RULES AND REGULATIONS *(please initial that you have received, read and understand the policies of the theatre.)*

Please Initial Here	<i>By initialing, I agree to abide by and enforce the rules and regulations of the City of Hermosa Beach and certify that I have read the rules, regulations and agreements listed. I will assume full responsibility for my group and will ensure all policies and procedures are followed.</i>
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ORGANIZATION ASSUMPTION OF RISK AND RELEASE OF LIABILITY

On behalf of our organization, I agree to assume all risks for injuries arising out of, or resulting from, the use of the *City of Hermosa Beach Community Theatre* or the *Pier Avenue 2nd Story Theatre* and/or personal property located thereon, and further agree to make no claim whatsoever for injuries out of, or resulting from, the use of any City building(s), grounds, real property or personal property located thereon. I shall be personally responsible on behalf of my organization.

Please note that the theatre will be opened only if payment is received two week s prior to the event in the form of a cashier's check, cash, credit card, or money order. I have read and agree to the attached theatre rental policy and house rules.

I/We have read and agree to abide by and enforce the rules, regulations and policies of the City of Hermosa Beach Community Theatre rental policy.

Signature of Applicant

Date

Applicant Name (please print)

Date

Approved by: _____
Department of Community Resources

Date



PUBLIC RELATIONS INFORMATION

Please provide the following information to be given out to the general public, if needed:

Name of Organization: _____

Performance/Event Title: _____

Performance/Event Dates and Times:

DATE										
SHOWTIME(S)										

DATE										
SHOWTIME(S)										

FORMS OF PURCHASING TICKETS: Online Website: _____
 Phone Reservations Reservation Contact Number: () _____
 Purchase at Box Office? *(day of event ONLY)*
 Other _____

Public Relations Contact: _____

Day Phone: () _____ Evening Phone: () _____

Email: _____

Please provide a brief description of your event. Please include any information that would be helpful for someone looking for more information on your show.
