|   |   |                                  | VENUE REQUEST FORM                             |
|---|---|----------------------------------|--|
|   |   | PLE                              | ASE TYPE OR PRINT CLEARLY IN CAPITAL LETTERS   |
| Company/Individual:   |   |                                  |  |
| Address:  |   |                                  |  |
| Contact Person:   |   |                                  |  |
| Tel:  | Fax:  | Email:                           |  |
| Public Entertainment License Number (if applicable):  |   |                                  |  |
| Company Registration Number:  |   |                                  |  |
| Name of Event:  |   |                                  |  |
| Nature of Event:  |   |                                  |  |
| Brief Description:  |   |                                  |  |
| Use of smoke / haze / fire / pyrotechnics: [ ] Yes [ ] No (If yes, please provide details)  |   |                                  | Expected No. of Pax:                           |
| No. of Cast & Crew:   | Major Artists Involved:   |                                  |  |
| Do you intend to sell tickets: [<br>(Please provide details)  | o you intend to sell tickets: [ ] Yes [ ] No<br>Please provide details) |                                  |  |
| Event dates and times   |   | Bump-in /Set-up dates and times: |  |
| Rehearsal dates and times:  |   | Bump-out dates and times:        |  |
| Venue Required:         theatres         [ ] The Singapore Airlines Theatre       [ ] Flexible Performance Space       [ ] Creative Cube  |   |                                  |  |
| event spaces [ ] Campus Green   | [ ] Amphitheatre  | [] VIF                           | P Verandah [ ] Concourse                       |
| studios & academic rooms       Others         [ ] Dance / Rehearsal Studio (with sprung floor)       [ ]  |   |                                  |  |
| By signing this form you acknowledge that a one-time public liability insurance is required in joint names with LASALLE College of the Arts Limited for hire of any venue spaces. Venue Hire officer will advise on minimum insured sum based on venue(s) required. |   |                                  |  |
| I, the undersigned, verify that the<br>in any way constitute a booking a  |   | accurate and I understa          | and that this venue hire request form does not |
| Signature:  |   |                                  |  |
| Name:   |   |                                  |  |
| Date: Comp  |   | ompany Stamp                     |  |
| <ul><li>Thank you for taking time to fill in our venue hire request form.</li><li>i. Venue Hire Requests may be submitted 12 months in advance. We will respond as soon as a decision is made and no less than 6 months prior to event date.</li></ul>              |   |                                  |  |

For major production involving long running shows (2 week run and above), requests will be considered outside the 12 months. Venue Hire Requests for Theatres have to be submitted at least 6 months in advance. ii.

iii.

All venue hire requests will be reviewed and you will be informed on the status of the request within 5 working days. iv.

We will respond as soon as possible. If you are working with specific deadline, please do let us know. ۷.

\*Note: Hirers are not permitted to carry out any form of publicity, including ticket sales without a signed contract with LASALLE unless prior consent by LASALLE is obtained.