

PERFORMING ARTS CENTER (PAC) CONTACT SHEET

Community Groups: Please return to Pat Stedman, 800 S. State Road, Harbor Springs, Michigan 49740

School Staff: Please send to Pat Stedman at the High School through the in-house mail system.

231-526-5553; 231-881-5553; pstedman3@charter.net or pstedman@harborps.org

This is NOT a Contract. You will be contacted soon to set a tour date.

DATE _____ Rental / School
ORGANIZATION / GROUP _____
(If applicable)

CONTACT PERSON _____ SCHOOL _____

PHONE _____ E-MAIL _____ BEST TIME TO CALL _____

EVENT DESCRIPTION _____

PUBLICIZED NAME OF THE EVENT _____

REQUESTED DATES _____ REHEARSAL TIMES _____ CURTAIN TIME _____

TICKET INFORMATION CONTACT NUMBER _____

PRICES _____

BOX OFFICE LOCATIONS _____

THIS ORGANIZATION/GROUP REQUESTS THE USE OF THE FOLLOWING:

_____ Stage _____ In front of the main curtain
_____ front half
_____ full

_____ Sound System _____ corded microphones – number needed _____
_____ wireless microphones – number needed _____
_____ CD player
_____ cassette player
_____ stage monitors

_____ Projection System w/screen, video-DVD
Power Point: _____ PC _____ iMAC _____ w/Sound _____ w/o Sound
Set up location _____

_____ Orchestra Pit: Describe set up: _____

_____ Speaker's Lectern

_____ Music Stands (number needed) _____ location _____

_____ Music Chairs (number needed) _____ location _____

_____ Stage Piano (Tuning is at the expense of the organization)

_____ Conductor's Podium

_____ Theatrical Lighting _____ only the stage area in front of the main curtain (Speaker)
_____ entire stage area (Concert)
_____ follow spots
_____ single set-up (on/off only)
_____ multiple changes (Play)
_____ dance lighting (Dance Recital)

_____ Other Areas _____ Band Room – Requires Community School Approval
_____ Practice Room – Requires Community School Approval
_____ Cafeteria – Requires Community School Approval
_____ Scene Shop/Loading Dock: When needed? _____
_____ Green Room: Will food be served there? YES NO
(Circle one)

_____ Box Office or Ticket Tables How Many? _____

Please list any additional lighting, sound, or technical requirements. We may be able to help.

NOTE: We provide ushers to renters for safety and security reasons. Our ushers will hand out programs BUT they do NOT take tickets. WE NEED 6 COMP TICKETS FOR THE USHERS.

FOR INTERNAL USE ONLY

FACILITY MANAGER SENT _____ RESPONSE DATE _____

COMMUNITY SCHOOL SENT _____ RESPONSE DATE _____

SUPERINTENDANT'S OFFICE SENT _____ RESPONSE DATE _____

PRINCIPALS: SENT _____ RESPONSE DATE _____

USHER CAPTAIN: SENT _____ RESPONSE DATE _____

CALENDAR ENTRY: _____ TOUR DATE: _____

RECORD OF ADDITIONAL CONTACTS: _____

**CONTRACT: SENT _____ RECEIVED _____

(**Community Rentals Only)

**DEPOSIT RECEIVED: _____

**BILLING DATE _____ **CHECK RECEIVED _____

