

Glendon Musical Ensemble Event and Rental Request Form

Received
by:

Please send completed form via e-mail attachment to: gme.glendon@gmail.com

For printed copies, please e-mail to the address above.

BOOKING INFORMATION						
ORGANIZATION INFORMATION						
Name				Tel.#:		
Address						
E-mail						
CONTACT 1						
Name				Tel.#:		
Address						
E-mail						
CONTACT 2						
Name				Tel.#:		
Address						
E-mail						
EVENT INFORMATION						
Title & Date of Event						
Location of Event						
PRODUCTS/INSTRUMENTS & BOOKING DETAILS						
Date <small>(dd/mm/yy)</small>	Names & #s of Products/ Instruments <small>(e.g. Mics (2), Extension cable (1))</small>	Activity <small>(e.g. set up, rehearsal, recording, performance, reception, or specified other)</small>	Access <small>(When you plan to arrive in the attic)</small>	Event Start Time	Event End Time	Vacate Time <small>(Attic lights out & locked up by)</small>

Glendon Musical Ensemble Event and Rental Request Form

Received
by:

Date (dd/mm/yy)	Names & #s of Products/ Instruments (e.g. Mics (2), Extension cable (1))	Activity (e.g. set up, rehearsal, recording, performance, reception, or specified other)	Access (When you plan to arrive in the attic)	Event Start Time	Event End Time	Vacate Time (Attic lights out & locked up by)

EVENT REQUEST (PLACE A CHECKMARK FOR THE APPLICABLE)

<input type="radio"/> Singers (Specify the performance solos, duets, trio, etc.)	<input type="radio"/> Instrumentalists (Indicate which instruments)	Types of Music Genre Preferred	Event Start Time	Event End Time	Vacate Time

ADDITIONAL NOTES

Please kindly indicate in this section any additional information that is required from your event. Also, please advise us in advance of important terms such as dress code, fees, and etc.

Completed by (Name): _____ **Signature:** _____ **Date:** _____