GENERAL INFORMATION



Florida Theatre Rental Application

The following information is required of new rental clients prior to the acceptance of an event booking or the issuance of a Theatre Use Agreement by the Florida Theatre. Please type or print legibly. Additional information may be required, including but not limited to a copy of your artist contracts and artist technical riders.

Company Name: DBA (if different): Contact Person: Street Address: City, State, Zip: Phone: Fax: Email: Web Site: Nonprofit Corporation Type of Organization: Corporation Partnership Sole Proprietor Federal Tax ID or Social Security Number: Date Business Established: If nonprofit, attach a copy of (1) your IRS 501(c)(3) Letter, and (2) your Florida Certificate of Consumer Exemption. **EVENT INFORMATION** Date of Proposed Show/Event: Show Time(s): Title of Proposed Show/Event: Names of all Performers/Acts: **Ticket Prices:** Discounts (if any): **PROFESSIONAL & TRADE REFERENCES**

128 East Forsyth Street

Suite 300

Jacksonville FL 32202



P. 904 355 5661

F. 904 358 1874

floridatheatre.com

Please provide the contact information for other venues that you have promoted or produced shows or events at.

Venue:
Address:
City, State, Zip:
Contact Person:
Phone:
Email:
Date(s) of Use:
Show Name:
Venue:
Address:
City, State, Zip:
Contact Person:
Phone:
Email:
Date(s) of Use:
Show Name:
Venue:
Address:
City, State, Zip:
Contact Person:
Phone:
Email:
Date(s) of Use:
Show Name:
Name of Bank:

128 East Forsyth Street Suite 300

Jacksonville FL 32202



P. 904 355 5661

F. 904 358 1874

floridatheatre.com

	Address:	
Bank #2 - - - - - -	City, State, Zip:	
	Contact Person:	
	Phone:	
	Account #:	
	Name of Bank:	
	Address:	
	City, State, Zip:	
	Contact Person:	
	Phone:	
	Account #:	
I represent that the above information is true and accurate. My company and I authorize the Florida Theatre to make such credit investigation as it may see fit, including contacting the above named references and banks and obtaining credit reports. My company and I authorize all trade references, banks and credit reporting agencies to disclose to the Florida Theatre any and all information concerning the financial and credit history of my company and myself.		
Authorized Signature:		
Print Name:		
Title:		
Date:		