

# Allegro Music and Dance School Concert Hall Rental Application

Name (First, Last): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Emergency Contact Name/Phone: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Organization Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Title of Event: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Day of the Week: \_\_\_\_\_

Time: \_\_\_\_\_ Quantity of chairs: \_\_\_\_\_

Serving Refreshments? Yes / No

All of the information provided above is accurate and complete,

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_