

RENTAL APPLICATION FOR CLASS, REHEARSAL, OR MEETING

Redwood Raks Collective

ACTIVITY:	Application Date:
Name:	Phone: Text OK <input type="checkbox"/>
Address:	City, State, Zip:
Email:	Website/Social Media:

WHAT ARE YOU PLANNING TO DO? *Please check as many as apply.*

<input type="checkbox"/> New Group Class	<input type="checkbox"/> Private / Semi-Private Lessons	<input type="checkbox"/> Workshop
<input type="checkbox"/> Established Group Class	<input type="checkbox"/> Meeting	<input type="checkbox"/> Short Term Rehearsal

PUBLIC OR PRIVATE?

<input type="checkbox"/> PUBLIC Anything advertised/promoted, everyone welcome. If open to the public, liability insurance must be arranged. May be free, donation, or with admission fee.	<input type="checkbox"/> PRIVATE Known, invited participants only, limited guest list.
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INSURANCE: Do you have Liability Insurance? (Required BEFORE any offering open to the public)

☐ YES. Company: _____ Policy #: _____ Expiration Date: ____

☐ NOT YET. Date you will have insurance secured by: _____

CLASSES

<input type="checkbox"/> ONGOING GROUP CLASS ongoing technique classes and performance classes, participants pay a set fee or a donation.	<input type="checkbox"/> ONE TIME WORKSHOP single workshop or short series of workshops, usually on weekends.	<input type="checkbox"/> PRIVATE or SEMI-PRIVATE lessons.
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JAM SESSION / MOVEMENT PRACTICE / MEETING

Open format, not a class, must have 1-2 responsible contact people who will always be present.

<input type="checkbox"/> SMALL GROUP 5 people or less	<input type="checkbox"/> MEDIUM GROUP 6-15 people (class rate)	<input type="checkbox"/> LARGE GROUP 16 or more people (party/event rate)
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REHEARSALS: ☐ Dance Company regular rehearsal ☐ Choreographer or group working on a piece

OTHER: ☐ Film / Photo Shoot / Something Else: _____

Which studio space are you interested in?

<input type="checkbox"/> JADE STUDIO <i>(on left)</i>	<input type="checkbox"/> BELLA STUDIO <i>(on right)</i>	<input type="checkbox"/> NOT SURE
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DURATION

<input type="checkbox"/> One Time Date & Time: _____	<input type="checkbox"/> Short Term: # of weeks: Requested day(s) & time: _____	<input type="checkbox"/> Long Term, Ongoing Requested day(s) & time: _____
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If your requested time isn't available, do you have a 2nd choice? _____

If your requested time isn't available, do you want to be on a waiting list? _____

NOTES: _____

Please submit bio, publicity materials, photos, etc. if you would like to be on our website, calendar, and other promotions. Promotion is entirely your responsibility, but we are happy to help!