

Date of Application: _____

Rev.6/2006djh

APPLICATION FOR USE OF DOWAGIAC SCHOOLS **PERFORMING ARTS CENTER**

206 Main St. • Dowagiac MI 49047 • 269-782-4400 phone • 269-782-3152 fax

Starting & Ending Date(s) Required:	
Adult in Charge:	
Address:	Phone:
Organization:	Group: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
Purpose:	
Additional Room(s) Needed: <input type="checkbox"/> Classrooms <input type="checkbox"/> Cafeteria <input type="checkbox"/> Use of Kitchen Facilities (add'l charges may apply)	
Explain:	
Time Building will be Open:	Time Building will be Closed:
Activity Begins:	Activity Ends:
Has PAC Supervisor been contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Has Stage/Sound/Lighting Requirements form been submitted to applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Has Proof of Liability & Property Damage Insurance been received? <input type="checkbox"/> No <input type="checkbox"/> Yes—Date:	

EQUIPMENT NEEDED

Furniture (Number & Type)	Audio/Visual
Desks	Television
Chairs	VCR or DVD Player
Tables	Screen
Risers	Drop Cords
Benches	PA System
Podium	Stage Lighting
	Movie Projector
	Acoustic shell
	Other:
	Other:
	Other:
	Other:

PAC Deposit Fee {if applicable}	\$100 deposit fee due with application {if applicable}	Cost (amounts shown are estimation only)	
Performance Fee	\$300 {if applicable}	Custodian Charges	\$
		PAC Supervisor Charges	\$
		Rehearsal Fees	\$
Custodian Charges		Food Services Staff Charges	\$
		Other:	\$
		Snow removal @ \$50/hour	\$
PAC Supervisor Rate (\$40/hour)		TOTAL DUE:	\$
		\$100 Deposit Fee {if applicable}	\$
Rehearsal Fees	_____ days x \$20/day = _____ total	Paid on:	
		BALANCE:	\$

I understand all that applies to this contract and have read the rules on the reverse side and will fully comply with such terms.

Authorized Official of Organization: _____ Date: _____

Approved Not Approved _____ Date: _____
Performing Arts Center Supervisor

Approved Not Approved _____ Date: _____
Principal, Dowagiac Middle School

Approved Not Approved _____ Date: _____
Asst. Supt. Business/Operations

Yellow-Licensee Pink-Bldg. Principal Green-Bldg. Custodian Goldenrod-Maintenance Tan-PAC Supervisor White-Admin.