



**Application for Use**  
**Stroede Center for the Arts**  
 319 Wayne Avenue, Defiance, OH 43512  
 Phone (419)784-3401 Fax (419)784-4923

**For Office Use**

Date Rec \_\_\_\_\_ By \_\_\_\_\_

User Group:

- DCCC Partner
- Non-Profit Rental
- For Profit Rental
- Other \_\_\_\_\_

Deposit Paid \_\_\_\_\_

Total Due \_\_\_\_\_

Total Paid \_\_\_\_\_

Organization Name \_\_\_\_\_ Event Date \_\_\_\_\_  
 Profit \_\_\_\_\_ Nonprofit (please list Tax ID# \_\_\_\_\_) DCCC Partner \_\_\_\_\_

Name of Event \_\_\_\_\_ # of Participants \_\_\_\_\_

Type of Event: Presentation \_\_\_\_\_ Play/Musical \_\_\_\_\_ Recital \_\_\_\_\_ Choir \_\_\_\_\_  
 Dance \_\_\_\_\_ Competition \_\_\_\_\_ Other \_\_\_\_\_

Event Description \_\_\_\_\_  
 \_\_\_\_\_

Audience Expectation: Demographic \_\_\_\_\_ Size \_\_\_\_\_ (200 performance hall/100 community room)

Requested Dates: Single Event: List date and times in table below.  
 Re-occurring Event: List all dates in table below. (maximum six months)  
 Set Requirements: Indicate dates stage will be occupied with set materials.  
 Dates: Set up \_\_\_\_\_ Set Down \_\_\_\_\_ (maximum 10 days)

Date	Event	In Time	Start Time	End Time	Out Time

(List additional dates on separate sheet and attach)

\_\_\_\_\_ I would like to have my event professionally video recorded. For information contact DCTV at 419-784-3401.

**Requested Rental Areas & Equipment** - \*ADDITIONAL COSTS APPLY

(Use of equipment requires pre-production meeting at least two weeks prior to event.)

Main Level: Performance Hall \_\_\_\_\_ Green Room \_\_\_\_\_ Control Room \_\_\_\_\_ Lobby \_\_\_\_\_

Basement Area (Not Handicapped Accessible): Community Room \_\_\_\_\_ Kitchen \_\_\_\_\_ Workshop \_\_\_\_\_  
 Round Tables \_\_\_\_\_ (10 max) Chairs \_\_\_\_\_ (100 max)

Staging: Piano\* \_\_\_\_\_ Organ \_\_\_\_\_ Chairs \_\_\_\_\_ Music Stands \_\_\_\_\_ Tables: 6' \_\_\_\_\_ (5 max) 4' \_\_\_\_\_ (4 max)

Lighting: House Lights \_\_\_\_\_ Single Scene \_\_\_\_\_ Multi-Scene\* \_\_\_\_\_ Spotlights\* \_\_\_\_\_ Lighting Kit\* \_\_\_\_\_

Audio Visual: Podium \_\_\_\_\_ Laptop \_\_\_\_\_ Performance Hall Projector w/Portable Screen (8x6)\* \_\_\_\_\_  
 Performance Hall Projector w/Full Screen (16x9)\* \_\_\_\_\_ Community Room Projector w/Screen\* \_\_\_\_\_

Microphones: Wireless (up to 8) \_\_\_\_\_ Wired \_\_\_\_\_ Overhead \_\_\_\_\_ Other \_\_\_\_\_

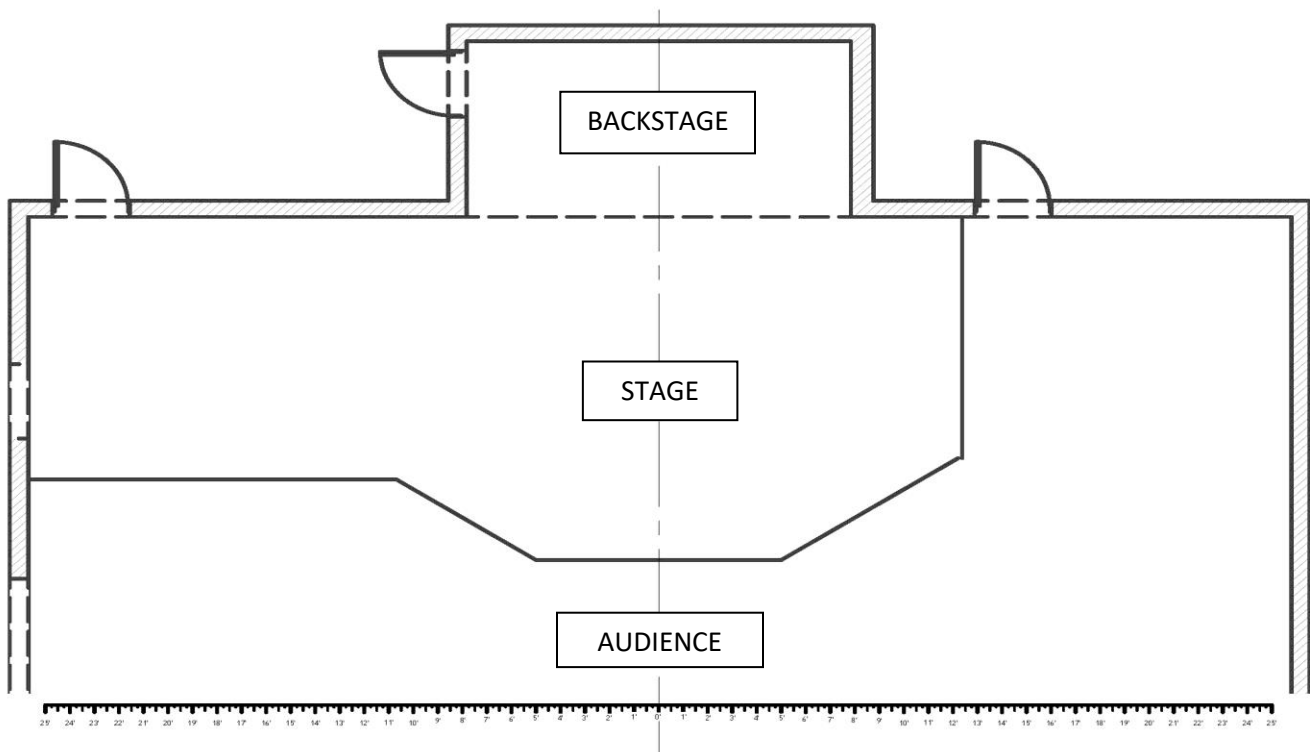
Lobby Setup: Ticket table \_\_\_\_\_ Merchandise table \_\_\_\_\_

Contact _____	Signature _____	Date _____
Address _____	City _____	State _____ Zip Code _____
Phone _____	E-mail _____	Other _____

Description of personal equipment and materials being used (i.e. instruments, props, stage set)

Notes:

Stage Plot: Diagram the stage set-up for the event



**DEFIANCE ARTS & MEDIA CENTER**  
**STAGE PLAN** 3/16" = 1'-0" SCALE  
REVISED: JUNE 19, 2010  
DRAWN BY: BWB