



YOUNGSTOWN CULTURAL ARTS CENTER Rental Space - INTEREST FORM

Event Details:

-Event Name:

Event Date:

Rental Period:

Start Time:

End Time:

Expected Number of Attendees:

Description of Event:

Facility Preferences:

Please indicate your preferred facilities:

Movement Studio

Class Room 111

Dressing Rooms

Art Room

Staffing Requirements:

Please indicate if you require staffing for your event:

House Manager

Tech Director

Special Requests or Requirements:

Technical Equipment Needed:

Any Deliveries Planned:

Contact Information:

Organization/Individual Name:

Contact Person

Email Address:

Phone Number:

Billing Address: