BENZIE COUNTY CENTRAL SCHOOLS 9222 HOMESTEAD RD. BENZONIA, MI 49616

Use Application for Benzie County Central Schools Auditorium

Date of Application	n				
Name of Organiza	tion				
Profit or Non-Profi	t Organization	Fede	Federal Non-Profit ID#		
Name of Responsi	ble Individual				
Mailing Address_					
Daytime Phone #_		Ever	ning Phone #		
	Check One:		Times:		
Dates Requested	Presentation	Rehearsal	Starting	Ending	
approved sound/ligi	•	ervisor will be provid	d times at current rate led as needed at a rat h to present:		
Will you charge ac		ent?no	yes (fee is	s \$)	
This organizatio we need any sound edunderstand that we can and the regular house projector screen are a	quipment, including min use only the floor of lights. (Simple items vailable if needed.)	e any special equipme crophones, or theatric the auditorium seatin such as an overhead	rovided. nt. We do not need to useal lighting. By checking g area, the stage in frontorojector, a speaker's led	this option we tof the main curtain,	
Sound Syste corded micre CD P	ophones (How many? _)wire	eless microphones (How stage monito		

speaker's lec		Grand Piano (on approva	
	music stands (numb	oer)ch	nairs (number)
conductor's p	oodium	acoustical stage shell	risers (additional)
theatrical ligh	nting		
		in front of main curtain (ca	twalk lights only)
	entire stage area (a	Ill stage and catwalk lights)	
		gle set-up (on-off only)	ns for more than one set-up)
		tiple changes (configuration	is for more than one set-up)
Back Stage	Areas:		
Band	d room (purpose:)
Choi	ir room (purpose:)
Store	age room (purpose:		
Dres	ssing room (purpose:_		
Ushers will i	need to be provided		
		ept full responsibility as name of organization)	s an omeiar representative o
			s an omeiar representative o
	(n	name of organization) (title or office)	·
		name of organization) (title or office)	Date:
	(n	name of organization) (title or office)	·
Signature:	ONLY:	(title or office)	·
Signature: FOR OFFICE USE (Priority Classification	ONLY: n:	(title or office) Approved:	Date:
Signature: FOR OFFICE USE (Priority Classification	ONLY: n:	(title or office) Approved:	Date:
Signature: FOR OFFICE USE (Priority Classification Reason for Non-Ap Custodian:	ONLY: n: proval:hours @ \$_	(title or office) Approved: Fees Assessed: Total Cost of S	Date:Not Approved
FOR OFFICE USE (Priority Classification Reason for Non-Ap Custodian: Fechnician:	ONLY: n: proval:hours @ \$hours @ \$	rame of organization) (title or office) Approved: Fees Assessed: = Total Cost of Section Se	Date:
FOR OFFICE USE OF Priority Classification Reason for Non-Ap Custodian: Fechnician: Supervisor:	ONLY: n:hours @ \$hours @ \$hours @ \$	rame of organization) (title or office) Approved: Fees Assessed: = Total Cost of State of	Date:
Gignature: FOR OFFICE USE OF Priority Classification Reason for Non-Ap Custodian: Fechnician: Supervisor: Rental fee:	ONLY: n: proval: hours @ \$ hours @ \$ days @ \$ gays @ \$	rame of organization) (title or office) Approved: Fees Assessed: = Total Cost of S	Date:
FOR OFFICE USE OF Priority Classification Reason for Non-Ap Custodian: Fechnician: Supervisor: Rental fee: Piano Use Fee:	ONLY: n: proval: hours @ \$ hours @ \$ days @ \$ gays @ \$	rame of organization) (title or office) Approved: Fees Assessed: = Total Cost of Section of Secti	Date:
Gignature:	ONLY: n: proval: hours @ \$ hours @ \$ days @ \$ events @ \$	rame of organization) (title or office) Approved: Fees Assessed: = Total Cost of Section Cost of	Date: