MAE WILSON
THEATRE

RENTAL APPLICATION

APPLICANT INFORMATION

Full Name: _____

Phone: _____ Email: _____

Name of Company / Organization (if applicable): _____

Registered charity or not for profit? Check one: _____ (YES) _____ (NO)

RENTAL INFORMATION

Name of Show / Event: _____

Preferred Show Date(s): _____

Preferred Move in/out Date (if different than show): _____

Description of the Event: _____

_____

_____

_____

_____

_____

Expected number of performers, presenters, or participants: _____

Is there anything else we should know about your event? _____

_____

_____

Please fill this application and email it to info@moosejawculture.ca