

— THE HISTORIC —
RITZ
 — THEATRE —
RESERVATION FORM

Information on this form will be used by Main Street Staff and City Officials to keep in contact with the presenter. The entries will be used to determine availability, assess rental needs, and estimate cost.

Organization: _____

Primary Contact: _____

Title (i.e. Director, Program Manager, Coordinator, Etc.): _____

Organization Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Primary Contact Telephone: (_____) _____ **Secondary:** (_____) _____

Fax: (_____) _____ **Email:** _____

Office Use Only	
Date Contacted:	_____
Office Contact:	_____
Date Deposit Paid:	_____ Ck# _____
Date Final Pmt.:	_____ Ck # _____

EVENT INFORMATION			
Dates Requested:			
Type of Event (Play, Concert, Performance, etc.)			
Will your event sell tickets or will the performance be free to the public?			
If your event is ticketed, where can patrons buy tickets? Please provide a phone number or website or indicate that tickets will only be sold at the door.			
Will you need...	YES	NO	TOTAL
Stage lighting			
Projection System @ \$100 per day			
Sound System @ \$100 per day for Operator			
Microphones @ \$5 each			
Access to the Concession Stand			
Access to the Box Office			
Access to the Orchestra Pit			
Access to the Dressing Rooms			
The Theatre cleaned between multiple performances @ \$75			
The Baby Grand Piano @ \$75 per day			
The Ritz Theatre Light/Sound Operator at rehearsal(s) @ \$100 per rehearsal			
Tables to be set up in the Lobby			
If yes, for what purpose (i.e. merchandise sales, food, etc.)			
Number of rehearsals requested:			



Event Date and Time (beginning and end): _____

Rehearsal Date(s) and Time(s): _____

Please block off the hours that you will need the Schaefer Center (including setup and breakdown, and both performance and rehearsals). If you need the Ritz Theatre before 10:00 a.m., please let Main Street Staff know so special arrangements can be made.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
10:00 a.m.							
11:00 a.m.							
Noon							
1:00 p.m.							
2:00 p.m.							
3:00 p.m.							
4:00 p.m.							
5:00 p.m.							
6:00 p.m.							
7:00 p.m.							
8:00 p.m.							
9:00 p.m.							
10:00 p.m.							

If you said you need lights and/or sound, please block off the hours that you will need the Ritz Theatre light/sound operator present.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
10:00 a.m.							
11:00 a.m.							
Noon							
1:00 p.m.							
2:00 p.m.							
3:00 p.m.							
4:00 p.m.							
5:00 p.m.							
6:00 p.m.							
7:00 p.m.							
8:00 p.m.							
9:00 p.m.							
10:00 p.m.							

Print Name _____

Signature: _____ Date: _____

Please make checks payable to City of Toccoa and mail to: Main Street Toccoa, P.O. Box 579, Toccoa, GA 30577.

