

EVENT PROPOSAL

EVENT PROPOSAL and REQUEST TO USE FACILITIES

Form ALP-110

California State University, Los Angeles

date received: _____

College of Arts and Letters – A&L Productions

received by: _____

Title of Event _____

Organization _____

Requestor/Authorized Representative _____	Title _____
Address _____	
City _____	State _____ Zip Code _____
Phone _____	FAX _____ Cell Phone _____
Email _____	

Which of the following best identifies your project? (*check all that apply*)

- | | | | | |
|------------------------------------|--|---|--|------------------------------------|
| <input type="checkbox"/> Concert | <input type="checkbox"/> Theatrical Presentation | <input type="checkbox"/> Musical Theatre presentation | <input type="checkbox"/> Class/Lecture | <input type="checkbox"/> Workshop |
| <input type="checkbox"/> Filming | <input type="checkbox"/> Opera presentation | <input type="checkbox"/> Dance presentation | <input type="checkbox"/> Recital | <input type="checkbox"/> Rehearsal |
| <input type="checkbox"/> Screening | <input type="checkbox"/> Audio Recording | <input type="checkbox"/> Variety Show/Showcase | <input type="checkbox"/> Meeting | <input type="checkbox"/> Other |

Also briefly describe your proposed activity: _____

Which A&L facility/venue are you requesting? (*check all that apply*)

- | | | | |
|---|--|---|----------------------------------|
| <input type="checkbox"/> State Playhouse | <input type="checkbox"/> Music Hall | <input type="checkbox"/> Arena Theatre (MUS 101) | <input type="checkbox"/> MUS 115 |
| <input type="checkbox"/> Choir Room (MUS 149) | <input type="checkbox"/> Band Room (MUS 150) | <input type="checkbox"/> Dance Studio 1 (KH 5108) | <input type="checkbox"/> KH 5105 |
| <input type="checkbox"/> KH 5111 | <input type="checkbox"/> Music Courtyard | <input type="checkbox"/> Other _____ | |

Please list the **first, second and third** choice of dates that you are requesting for your event:

	DATE	ARRIVAL TIME	SHOWTIME	END TIME	ACTIVITY
FIRST Choice					
SECOND Choice					
THIRD Choice					

List any additional dates/times, including all rehearsals and access times prior to the event. Please attach a complete rehearsal/performance schedule, if available: _____

To the best of my knowledge, the attached information is true and correct. I hereby attest that I am empowered to act and sign documents on behalf of the individual or organization requesting space and to bind that organization to perform pursuant to such documents.

Requestor's Signature (<i>Authorized Representative</i>)	Date	<div style="border: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; font-size: small;"> PAFC Hold TD Review </div>
Club Adviser or Department Chair Approval (<i>CSULA only</i>)	Date	<div style="border: 1px solid black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="text-align: center; font-size: small;">A&L Dean Approval (<i>when required</i>)</div>

*** Please submit this form **at least 3 weeks prior to your activity** to the A&L Productions in the Theatre Arts building, TA 204. Alternately mail, email, fax or DocuSign this application with any supporting documents to:

California State University, Los Angeles
College of Arts and Letters – A&L Productions
5151 State University Drive – TA 204, CA 90032
Phone 323-343-4133 FAX 323-343-5565
Email: epietrzak@calstatela.edu, pts@calstatela.edu

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(form revision date November 2021)

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How many people are in your company (performers, crew and support staff)? _____
How many audience members do you expect to attend your event? _____

Will you be holding a reception outside the theatre? Yes No
If yes, pre-event reception or post-event reception

Will there be food/drink at the reception or at any other time during the activity? Yes No
If so, please describe your food-related activity in detail: _____

Will you be selling tickets? Yes No If yes, ticket prices: _____

You may attach a complete Tech Rider. Are you including a Tech Rider? Yes No

Please describe ALL items you plan to bring to the activity/classroom/performance space. For example: musical instruments, scenery, sets, furniture, props, tables, chairs, food, DJ equipment, etc. (Subject to approval of A&L TD):

Please describe any technical needs (*i.e. projector, microphones, piano, podium, chairs, tables, music stands, special light plot or cues*) or equipment that you may want to request A&L Productions to provide:

Stage, set and setup floorplans attached?: Yes No
Will you need to use stage lighting? Yes No
Will you need to use the house sound system? Yes No
Will you need dressing rooms? Yes No

Does your event involve live music, musicians, bands, orchestras, combos, or DJs? Yes No
If so, please attach a detailed breakdown of the instrumentation and set-up requirements for each.
Breakdown of various music acts and instrumentation attached?? Yes No
Setup diagrams attached? Yes No

Is open flame (candles, cigarettes, cigars, prop guns) a part of your event? Yes No
If yes, please attach explanation: _____

Will you be bringing any scenery that needs to be hung overhead or flown during the show? Yes No
If yes, please attach explanation: _____

Do you have any video or special effects needs, such as fog or pyrotechnics? Yes No
If yes, please attach explanation: _____