



To Whom It May Concern:

Thank you for planning your event at the Cañada College Theatre. In order to formalize the application process, you will need to complete the enclosed facilities application. Once you have completed and signed the application, please mail the original or fax it back to me as soon as possible to the address listed below.

I will review your application, approve the dates and forward the application to our facilities Coordinator, Rachel Corrales. Rachel will prepare a contract and invoice for your event.

In order to rent the college's facilities you will also need to provide a certificate of Comprehensive General Liability Insurance as described below:

1. \$ 2,000,000 combined Property and Liability Coverage **per Occurrence**

**OR**

1. \$ 2,000,000 combined Property and Liability Coverage, and
2. \$ 4,000,000 aggregate coverage.

San Mateo County Community College District will need to be named as both the **certificate holder** and as **additionally insured** for the date(s) of the event. This certificate must be received by Rachel in order to finalize your request.

If you have any questions or need additional assistance regarding your contract, invoice, insurance or billing, please call Rachel at (650) 306-3271.

If you have questions regarding dates, times, staffing or technical requirements, please call me at (650) 306-3316.

Sincerely,

Michael Walsh  
Theatre Manager  
Cañada College  
4200 Farm Hill Boulevard Redwood City, CA 94061  
Phone (650) 306-3316  
Fax (650) 306-3224

Cañada College  
4200 Farm Hill Boulevard  
Redwood City, CA 94061  
Voice 650-306-3316  
Fax 650-306-3224



Today's Date  
\_\_\_\_\_

### Theatre Facilities Reservation Request

BY PERSONS OR ORGANIZATIONS **NOT** DIRECTLY AFFILIATED WITH CAÑADA COLLEGE

Organization Name: \_\_\_\_\_

Non-Profit Number\_94-\_\_\_\_\_ OR SS No. \_\_\_\_\_ Or Tax ID \_\_\_\_\_

Your Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Phone: \_\_\_\_\_ Email \_\_\_\_\_

ONSITE CONTACT NUMBER FOR DAY OF EVENT: \_\_\_\_\_

Event Type: \_\_\_\_\_

Expected number in attendance for rehearsals \_\_\_\_\_ For performances \_\_\_\_\_

List Event Date(s): \_\_\_\_\_

Date 1: \_\_\_\_\_  Set-up  Rehearsal  Performance/Event

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

Date 2: \_\_\_\_\_  Set-up  Rehearsal  Performance/Event

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

Date 3: \_\_\_\_\_  Set-up  Rehearsal  Performance/Event

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

**Use the attached additional sheet if needed**

PLEASE INDICATE THE FACILITY OR FACILITIES REQUESTED:

<b>Theatre</b> (capacity 520)	<b>Additional space needed:</b>
<input type="checkbox"/> Theatre Apron (in front of main Curtain only)	
<input type="checkbox"/> Theatre Full Stage	
<input type="checkbox"/> Foyer/Lobby	
<input type="checkbox"/> Box Office	

Are you selling concessions? Yes\_\_\_ No\_\_\_ If yes, please describe \_\_\_\_\_

Are you serving food? Yes\_\_\_ No\_\_\_ If yes, please describe \_\_\_\_\_

Are you selling tickets? Yes\_\_\_ No\_\_\_ If yes, how much will you charge? \_\_\_\_\_

Are you charging attendees a fee? Yes\_\_\_ No\_\_\_ If yes, how much will you charge? \_\_\_\_\_

Are you anticipating Special Traffic/Parking Needs? Yes\_\_\_ No\_\_\_

(If yes, check all that apply):  Reserve Parking Spaces # \_\_\_\_\_

Reserve Parking Lot # \_\_\_\_\_

Suspend Parking Regulations (except at metered lots)

Directing Traffic Flow

**TECHNICAL REQUIREMENTS NEEDED:**

Stage	Lighting	Sound	Audio Visual
<input type="checkbox"/> Main Curtain	<input type="checkbox"/> Basic House Plot-- Includes areas and some specials	<input type="checkbox"/> Microphones How Many? ____	<input type="checkbox"/> DVD Projection
<input type="checkbox"/> Black Masking	<input type="checkbox"/> Additional specials	<input type="checkbox"/> CD Playback	<input type="checkbox"/> VHS Projection
<input type="checkbox"/> Cyc	<input type="checkbox"/> Additional Color	<input type="checkbox"/> MD Playback	<input type="checkbox"/> Computer Projection
<input type="checkbox"/> ½ Stage Traveller	<input type="checkbox"/> Special focusing	<input type="checkbox"/> Cass Playback	<input type="checkbox"/> 35mm Projection
<input type="checkbox"/> Fly system (drops etc.)	<input type="checkbox"/> Spotlight	<input type="checkbox"/> Monitor speakers	<input type="checkbox"/> video feed to backstage
<input type="checkbox"/> Scenery on stage	<input type="checkbox"/> Patterns	<input type="checkbox"/> Audio feed	
<input type="checkbox"/> Podium		<input type="checkbox"/> Backstage monitors	
<input type="checkbox"/> Portable risers (3'X8') How many? ____	<b>Other</b>		
<input type="checkbox"/> Chairs-how many? ____			
<input type="checkbox"/> Tables (30"X6') How Many? ____			
<input type="checkbox"/> Acoustical Shells			
<input type="checkbox"/> Music Stands			

Requestor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send completed application to the attention to Mike Walsh at  
Cañada College Theatre 4200 Farm Hill Blvd. Redwood City CA 94061, or Fax to: 650-306-3224

We will contact you with availability information and an estimate

*Application must be received 45 days prior to the date of use.*

## Cañada College Theatre Rates

<b>Facility</b>	<b>Seating</b>	<b>Group I</b>	<b>Group II</b>	<b>Group III</b>	<b>Group IV</b>
		<b>Civic Center Groups Collecting no fees</b>	<b>Non-Profit Organizations Collecting no fees</b>	<b>For profit and Religious Organizations Collecting no fees</b>	<b>All groups Collecting Fees</b>
<i>Main Theatre</i>	516	<i>No Rental Fee</i>	<i>\$75 / hour</i>	<i>\$100 / hour</i>	<i>If fees are collected, Use group rate plus 10% of net proceeds</i>
<i>Foyer only</i>		<i>No Rental Fee</i>	<i>\$30 / hour</i>	<i>\$40 / hour</i>	
<i>Additional classrooms</i>		<i>No Rental Fee</i>	<i>\$20 / hour</i>	<i>\$30 / hour</i>	
<i>Rooms 3-142 &amp; 3-148</i>			<i>\$30 / hour</i>	<i>\$45 / hour</i>	

### **Labor**

*A minimum of one theatre technician is required for all events.*

*Custodial service is required on events of over 100 people or if food of any kind is served.*

*Security officer may be required in some cases.*

### **Labor Rates**

Theatre Manager / Lead Technician \$47 / hour

Additional technicians \$39 / hour—4 hour minimum

*Technician's time includes all set-up and clean-up*

*Hours over 7.5 charged at time and 1/2*

Custodians \$52 / hour—2 hour minimum

Security \$50 / hour—2 hour minimum

### **Equipment**

Main Theatre rentals include:

Black masking, Main Drape, projection screen and full rigging.

Basic house Light plot and Expression console

16 channel sound Mixer with playback and public address capability

*Technicians are required for all Theatre rentals. Equipment is not included in facility rental fees.*

*All rental contracts must employ union custodial crew provided by the district.*

*Security fees will apply as well.*

***Application must be received 45 days prior to the date of use.***

**Additional dates and times of use**

**Date 4:** \_\_\_\_\_  **Set-up**  **Rehearsal**  **Performance/Event**

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

**Date 5:** \_\_\_\_\_  **Set-up**  **Rehearsal**  **Performance/Event**

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

**Date 6:** \_\_\_\_\_  **Set-up**  **Rehearsal**  **Performance/Event**

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

**Date 7:** \_\_\_\_\_  **Set-up**  **Rehearsal**  **Performance/Event**

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

**Date 8:** \_\_\_\_\_  **Set-up**  **Rehearsal**  **Performance/Event**

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_

**Date 9:** \_\_\_\_\_  **Set-up**  **Rehearsal**  **Performance/Event**

Arrival Time: \_\_\_\_\_ A.M. or P.M. Time Event Begins: \_\_\_\_\_ A.M. or P.M.

Time Event Ends: \_\_\_\_\_ A.M. or P.M. Time of Departure: \_\_\_\_\_ A.M. or P.M.

Total Hours: \_\_\_\_\_