



Skagit County's Historic Performing & Cinematic Arts Center

Post Office Box 2312 • 712 South First Street

Mount Vernon, Washington 98273

Office 360-419-7129 • www.lincolnthatre.org

Lincoln Theatre Booking Request – 2019/20

Organization requesting use of Theatre

Name of Event

Description of Event

Date(s) and Time(s) of Event/Performance

Length of Show

Intermission Yes or No?

Show Open to Public or Private?

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Rehearsal

Yes No

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

Date(s) and Time(s) if yes

Audition

Yes No

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

Date(s) and Time(s) if yes

Reception

Yes No

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

Date(s) and Time(s) if yes

Private

Public

Pre-event

Post-event

Liquor

No Liquor

| | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|

Load-in Time

Load-out Time

Sound Check Time

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Tickets

No tickets will be sold. Note: Maximum theatre occupancy is 486.

Tickets will be sold. For any event where tickets are sold, theatre must be the sole source ticketing agent.

Ticket Prices (include \$1.50 Preservation Fee which will go to the theatre)

Reserved +\$1.00

Festival + \$.50

At Door Donation Only N.C.

Number of Complimentary Tickets

Number of Outside Sales Tickets +\$.25

Tickets Go on Sale _____ (Date)

Note: tickets usually go on sale 60 days before event.

Additional ticketing needs

Stage lighting (number, size, colors, and location)

Stage sound requirements/description

Projection (DCP, Blu-ray, DVD, and PowerPoint) requirements: ***Presentations must be received at the Lincoln 3 business days prior***

EQUIPMENT

| | | | | | |
|--|-------------------|--|--|--------------------|--|
| | Sound System | | | Display tables | |
| | CD player | | | Podium | |
| | Microphones | | | Thrust Stage | |
| | Monitors | | | Stage Stairs | |
| | Projection System | | | Panel Presentation | |
| | Orchestra Pit | | | Q & A | |
| | | | | | |

Technical Labor Requirements

It is mandatory that the Lincoln Theatre provide stage management supervision and house management supervision. Beyond that, please indicate if you need Lincoln Theatre personnel for the following

Stage Set-up

Sound Set-up

Security

Lighting Set-up

Video or film projection set up

Marketing

- Renter will supply finished artwork for 11 x 17" poster no later than six weeks before event date. Theatre will print and post in approximately 275 locations (Skagit/Snohomish Counties) for a fee of \$275
- Renter will supply finished artwork for 11 x 17" poster no later than six weeks before event date. Theatre will print and post in approximately 300 locations (Skagit/Snohomish/Whatcom Counties) for a fee of \$300.
- Renter wants event placed on theatre's website, email, hard copy program guide and press releases at no charge. Content (image and two lines of text plus additional copy for webpage) will be sent to exec.dir@lincolntheatre.org 60 days prior to event date.
- Other marketing as requested _____

Special Requirements

Organization's Representative

Name _____

Organization _____

Street Address _____

Mailing Address _____

City, State, Zip Code _____

Telephone _____

Facsimile number _____

Email address _____

I have read and agree to the Lincoln Theatre rental policies and rates

Signed _____ Printed _____ Date _____
(if responding by email, please type name in bold italics to indicate signature)

Return to Lincoln Theatre
Via email: exec.dir@lincolntheatre.org
Via mail: Lincoln Theatre, PO Box 2312, Mount Vernon, WA 98273