



**David A. Straz, Jr. Center for the Performing Arts
Rental Application**

Please provide information for each of following questions by listing company names, addresses, telephone numbers and contact persons. Failure to do so will result in a delay in the processing of this application. Reference must reflect those of Applicant.

Applicant Information (organization who will sign contract and provide liability insurance)

Applicant: _____
(name of company, business or individual as you report it on a W-9 and certificate of insurance)

Contact Person: _____ Title: _____

Address: _____

City/State/Country: _____ Zip/Postal Code: _____

Phone #: _____ Fax: _____

Email Address: _____

Employer Identification #: ____ - _____

Please check one: ____ Profit OR ____ Non-Profit (you must submit a FL Letter of Exemption to qualify for non-profit rental rates.)

Event Contact Person (if different from above): _____

Phone #: _____ Email Address: _____

Event Information:

Requested Dates/Times: _____

Requested Theater(s): ____ Carol Morsani Hall (capacity 2,610) ____ Ferguson Hall (capacity 1,042)
____ Jaeb Theater (capacity 300) ____ Shimberg Playhouse (capacity 100)
____ TECO Theater (capacity 100 to 200)

Full Description and Name of Show or Function for which the facility is being rented: (Attach additional sheet if necessary)

Estimated Attendance: _____

Facility References:

1. Facility: _____ City/State: _____
Contact: _____ Phone#: _____
Name of Event: _____ Date of Event: _____

2. Facility: _____ City/State: _____
Contact: _____ Phone#: _____
Name of Event: _____ Date of Event: _____

3. Facility: _____ City/State: _____
Contact: _____ Phone#: _____
Name of Event: _____ Date of Event: _____

Credit References:

Organization or Bank: _____
Contact: _____ Phone #: _____

Business References:

If you wrote N/A for Facility References or if you were only able to list one reference, please list three companies with which you have done business.

1. Company: _____ City/State: _____
Contact: _____ Phone#: _____

2. Company: _____ City/State: _____
Contact: _____ Phone#: _____

3. Company: _____ City/State: _____
Contact: _____ Phone#: _____

How did you hear about the Straz Center? _____

This application will **NOT** be processed/approved if information is incomplete or inaccurate. No dates can be contracted without an Approved Rental Application.

This is not a legal contract and is not binding to either the Applicant or the Straz Center for the Performing Arts, Inc. (Straz Center). **DO NOT** make any advance arrangements regarding facility usage until a contract has been fully executed with Straz. This includes disseminating or releasing any information or publicity of any nature in regard to the event including, but not limited to, the offering of tickets or reservations.

I hereby confirm that the above is true and correct to the best of my knowledge.

Signature (Person who will sign contract)

Date

PAYMENT SCHEDULES & CONTRACT DEADLINES

1. Thirty (30) days from the date the contract is issued by the Straz Center the full license fee is due.
2. If the event date is less than ninety days away, a payment schedule will be assigned.
3. In the event of cancellation, the full rental fee is non-refundable and non-transferable and any production and/or labor costs incurred prior to the cancellation must be paid by the licensee.
4. Ten (10) business days prior to the event, the amount of the estimated production costs are due.
5. Payment must be made by cashier's check, certified check or business check and should be made payable to the Straz Center for the Performing Arts.
6. A Certificate of General Liability Insurance is due no later than ten (10) business days prior to load in of the event and must meet the requirements as outlined in section 10.2 of the contract rider.
7. A Certificate of Resale or a Certificate of Exemption (if applicable), is due with the signed contract.
8. The Straz Center will hold your date without a contract and deposit for thirty (30) calendar days. After this date if you have not contracted the facility(ies), the Straz Center reserves the right to **automatically release** the date without notification.
9. Should another party request, or *challenge*, your date(s) **before** you have requested a contract:
 - a) The Straz will attempt to reach you by phone, fax and/or e-mail for one (1) full day to inform you of the second party requesting the same date(s). **If we are unable to reach you, the date will be released** and made available to the second party.
 - b) If Straz is able to contact you and you confirm the date(s), you will be given two (2) business days to sign the license agreement and submit a **full non-refundable, non-transferable deposit**.
 - c) If a full deposit is not received within the specified time, the second party shall be given two (2) business days to sign the license agreement and submit a **full non-refundable, non-transferable deposit**, and the date(s) shall be contracted to that second party.
10. If a firewatch is needed the Straz Center requires twenty (20) business days to arrange requirements with state and local authorities.
11. The Straz Center must approve any Marketing or Publicity that contains our logo, address, phone information or images of the facility.

Any questions regarding this application should be directed to Jeanne Piazza, Programming Manager (813) 222-1017 or via email at jeanne.piazza@strazcenter.org or fax at 813-222-1057.

David A. Straz Center for the Performing Arts, Inc
1010 N. WC MacInnes Place
Tampa, FL 33602-3720