



# Martin Woldson Theater AT THE FOX

## PRESENTER/USER APPLICATION

Thank you for your interest in the Martin Woldson Theater at The Fox. Completing and submitting this application is the first step in the booking process. This application must be received in our office no later than 30 days prior to the proposed event date. Under no circumstances will a new presenter be granted a firm hold without satisfactory completion of the application process, in accordance with deadline requirements. **Completion and approval** of this application will then be followed by a formal Limited License Agreement (contract). Please fill in **all required information** and return to: Jenifer Johnston, Martin Woldson Theater at The Fox, PO Box 363, Spokane, WA 99210. If you have questions, please call (509) 252-2626.

**Presenter Name**

**Presenter Address**

Street Address

City

State

Zip Code

**Contact Information** ( )

( )

Phone

FAX

E-mail address

**Person Authorized to Sign Contract**

(please print)

**Your Organization is**  For Profit  Local Non-Profit (Please attach a copy of your IRS 501(c)(3) letter.)

**The exact title of your event/performance is:**

**List all Headline performers and opening acts**

**Type of Show**

(ie. variety, music, dance, lecture, etc.)

**Requested date(s) of show**

**Is your event ticketed?**  YES  NO **Is it open to the public?**  YES  NO

The above information must be provided in full and verified before a Limited License Agreement can be initiated. It is understood that the Martin Woldson Theater at The Fox may or may not grant approval of the request set forth above. Applicant hereby represents that he/she has made a full and complete disclosure of all information which might be pertinent to the consideration of this presenter application and that all of the statements and information are true and correct.

Applicant

Date

**APPROVED:**  YES  NO

If not approved, reason:

BY: Brenda Nienhouse, Executive Director

Date