

Rental Request Form

Please fill in the following information and a member of our rental staff will contact you about your show:

Rental Information:

Production: _____

Name of Organization: _____

Type of Organization: School/Education Professional Community
 Outdoor Venue Other- Specify _____

Contact Information:

Contact Name: _____

Title: _____

Phone Number: _____

Fax Number: _____

Email: _____

Payment Method: Credit Card Cash Check

Billing Information:

Address: _____

City: _____

State: _____

Zip Code: _____

Shipping Information:

Address: _____

City: _____

State: _____

Zip Code: _____

Production Information:

Rental Inquiry: _____

Date Needed: _____

Return Date: _____