

Application to Request Entertainment

MCT is available to come perform for your upcoming event. We need the following information, as best to your knowledge, filled out and submitted to the MCT board by the third week of the month prior to your event. For example, if your event is the fourth Thursday of June, MCT needs your application by the third week of May. Some exceptions may apply.

WE ARE MUSICAL THEATRE

WWW.MCTOHIO.COM



Name of group/individual requesting entertainment _____

Contact name _____ Phone # _____ Email _____

What type of event is MCT performing for? _____

Date of the event _____ Location of the event _____

Time of the event _____ Time that MCT can set up/begin practice _____

Is the event inside _____ or outside _____? Is electricity available? _____ Bathroom facilities? _____

Will MCT provide a sound system? _____ Will MCT provide lighting? _____ Is there a stage? _____

If there is a stage, what are the dimensions? _____ Is it a raised stage? _____

What else can you tell us about the venue? _____

What type of performance are you wanting? Singing only _____ Acting only _____ Singing and acting _____

Accompaniment to be... piano only _____ guitar only _____ full band _____ karaoke-style w/digital music _____

What genre of music should MCT prepare? _____

What else can you tell us about the type of show you are wanting? _____

How small/large of an audience do you foresee? (range) _____ What is your capacity? _____

Is there a charge for admittance to the event? _____ If yes, what is the charge? _____

Will there be refreshments and/or food? _____ If yes, is there a charge for those items? _____

MCT does require a fee for traveling entertainment. The fee covers travel, music, musicians, and other supplies as needed for the event. What is your offering of payment for this event? _____

Thank you for your request! The board will review the request and respond during the third week of the month. Our meeting days change, but the week stays the same (with some exceptions).

You may mail this request to PO Box 637, Millersport, OH 43046 or email to: millersportcommunitytheatre@gmail.com

(For MCT use)

Point person for this event _____

Fee that has been agreed upon for the event _____

Any additional information not provided above _____