**Show Title/Group:**

**Main Point of Contact Phone/ Email:**

**Cast/Crew (Please specify Training Center Students and Graduates):**

**Production Type:**

**Preferred Days of Performance**: (list of options)

**Preferred Start Date**:

**Preferred Run Length** **(circle one)** 2 Weeks 4 weeks other:\_\_\_\_\_\_

**What Type of Show are you proposing? (circle one)** Sketch/Improv/Stand-Up/Variety/Other

**Which of These Best Describes Your Show?**

Polished Sketch Revue Weird / Experimental Large Ensemble Intimate and / or sexy

**Show Description:**

**Why do you feel your show would be a good fit for our venue?**

**Tech/Music Requirements:**

**List Any Specialty Tech Requirements:**

**Past Experience of Director/Ensemble:**

**Specific Target Audience:**

**Our highest attended shows and best audiences are typically a result of the cast, director, and producer aggressively promoting their show and sending out many personal invites to friends and family. What is your marketing strategy?**