

Expected number of Cars

TECHNICAL REQUIREMENTS FORM

Kingsway Theatre Hire

Please complete IN FULL the following. This will greatly assist us in planning your event and help ensure the smooth running of your show. Please provide as much detail as possible. Please return with all required documents. Hirer's Name _____A.B.N.____ Address Contact Person (s) Telephone Number Email Name of Organisation Type of Performance Name of Venue Required KINGSWAY THEATRE **USAGE SCHEDULE** Intention Date Time Expected running time of show/event __Interval______Finish_____ Begins___ Maximum number of patrons expected to attend?_____ Wheelchair patrons YES NO Number of Performers Female Male Age range of Performers Number of Backstage Crew Number of Front of House Helpers

| STAFF REQUIRED | | | | |
|-------------------------------------|----------------------|---------------------|--------------------|-----------|
| Theatre Manager | √ Required b | y KCC | | |
| Sound Tech | | | | |
| Lighting Tech | | | | |
| Follow Spot Operator | | | | |
| Ushers | √ Required b | y KCC | | |
| Parking attendant | √ Required b | by KCC | | |
| Front of House Manager | √ Required l | by KCC | | |
| Security | √ Required I | by KCC | | |
| Theatre Manager or authoroccupancy. | rised representative | must be in attenda | nce at all times o | f Hirer's |
| • Are you intending t | o employ external te | echnical assistance | ? YES | NO |
| If yes, please give detai | ls. | | | |
| Name of Company: | | | | |
| Position of employmen | t; | | | |
| Contact phone numbers | 3 | | | |
| | | | | |
| FOOD & BEVERAGE F. | ACILITIES | | | |
| Will you be requiring | ng any of the follow | ing? | | |
| Trestle tables | YES | NO | How many? | |
| Urns | YES | NO | How many? | |
| Are you planning o | n bringing in any of | the following? | | |
| Merchandising | YES | NO | | |
| Details | | | | |
| Food Details | YES | NO | | |
| Drinks | YES | NO | | |
| N.B. Alcohol is not allowe | d on the premises. | | | |

| White Board | YES | NO | | | | | |
|---|----------------|----|-------|--|--|--|--|
| Position | | | | | | | |
| (Please bring your own markers and eraser for whiteboard) | | | | | | | |
| • Are you bringing any of the following (please give details) | | | | | | | |
| | | | | | | | |
| Props | | | | | | | |
| Set Pieces | | | | | | | |
| | | | | | | | |
| Instruments | | | | | | | |
| | | | | | | | |
| Costume Racks | | | | | | | |
| | | | | | | | |
| Will you be requiring any of the follow | ving? | | | | | | |
| Standard Orchestral Lighting (open white) | YES | | NO | | | | |
| Theatrical Lighting | YES | 1 | NO NO | | | | |
| | | - | _ | | | | |
| Details | | | | | | | |
| Follow Spot | YES | | NO | | | | |
| | _ | 7 | | | | | |
| Special FX (Smoke, Haze, Strobe,) | YES | | NO | | | | |
| | | | | | | | |
| Details | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| AUDIO VISUAL | | | | | | | |
| • Will you be requiring the use of any of | the following? | | | | | | |
| Power Point Presentation | YES | | NO | | | | |
| Computer is provided) | | | | | | | |
| Projector or | YES | | NO | | | | |
| LED Screen (8m x 4m) | YES | | NO | | | | |

| SOUND | | | | | | | |
|---|------------|---------|----------|--|--|--|--|
| XX'11 1 C4 C 11 | . 0 | | | | | | |
| Will you be requiring any of the following any of the following and the followi | owing? | | | | | | |
| Foldback Speakers Microphones (Wireless) | YES YES | | NO NO | | | | |
| H/Held Headset | | Clip On | | | | | |
| Microphones (Cable) | YES | | NO | | | | |
| Details | | | | | | | |
| | | | | | | | |
| Microphone Stands | YES | | NO | | | | |
| | | | | | | | |
| I/We have read the conditions of hire and accept and agree to them. | | | | | | | |
| I/We have completed the attached technical requirement form and enclose a copy of our Public Liability Insurance cover. | | | | | | | |
| | | | | | | | |
| Print Name | | | | | | | |
| | | | | | | | |
| Signature | | | | | | | |
| | | | | | | | |
| On behalf of | | | | | | | |
| | | | | | | | |
| Date | | | | | | | |