

TRIM Reference: \_\_\_\_\_



## LOCAL ART GALLERY SPACE VENUE USE APPLICATION

### CONTACT DETAILS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

### EXHIBITION INFORMATION

Name of Art Exhibition: \_\_\_\_\_

Date of Installation: \_\_\_\_\_

Date(s) of Art Exhibition: \_\_\_\_\_

Date of Dismantling: \_\_\_\_\_

How many art pieces in the Exhibition\*: \_\_\_\_\_

Who is installing the art pieces? \_\_\_\_\_

What will be used for the installation of the exhibition?

Easel       Hanging       Other \_\_\_\_\_

Will you be staffing the exhibition?       Yes       No

If NO, who will be managing the exhibition? \_\_\_\_\_

Do you have insurance for the Art pieces?       Yes       No

### ADDITIONAL INFORMATION

Will you bringing a mobile eftpos?       Yes       No

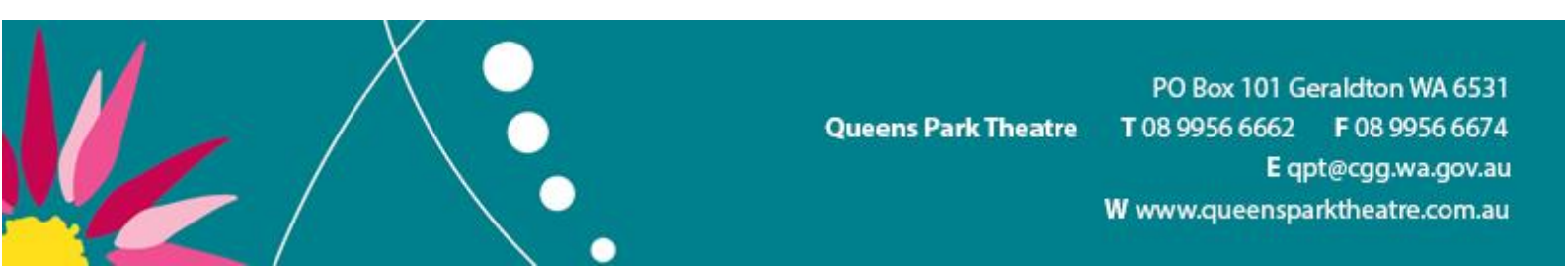
Do you need to hire the QPT's eftpos?       Yes       No

Will you bringing your own cash register?       Yes       No

Do you need to hire the QPT's cash register?       Yes       No

### PLEASE NOTE

\* The Lower Foyer of the Queens Park Theatre can host up to 25 art pieces.



## OFFICE USE

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| <input type="checkbox"/> Booking Approved?             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> PL Attached?                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> Applicant Advised of Outcome: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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- |  |                              |                             |
|--|------------------------------|-----------------------------|
| <input type="checkbox"/> Invoice Raised: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|--|------------------------------|-----------------------------|

Venue Hire:  Yes  No

Eftpos Hire:  Yes  No

Cash Register Hire:  Yes  No

Officer Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_