

Lincoln Theatre Private Screening Booking Request – 2021

Person/Organization requesting use of Theatre:

Title of Film:

Description of Event - Birthday, Anniversary, Etc.:

Date and Time of Event:

Length of Event

Arrival Time:

Screening Time:

Departure Time:

Number of Expected Guests:

Projection (DCP, Blu-ray, DVD, and PowerPoint) requirements: *Presentations must be received at the Lincoln 2 weeks prior for prepping and testing*

Additional Requests:

Sound System		Display tables	
Microphones		Podium	
Wurlitzer Organist		Personalized Slide*	
Art Bar			

*A personalized event slide can be put on screen just prior to the presentation at no charge. Please supply high resolution image(s) to <u>roger@lincolntheatre.org</u>

Organization's Representative

Name		
Organization	n	
Street Addre	ess	
Mailing Add	dress	
City, State, 2	Zip Code	
Telephone _		
Facsimilen	umber	
Email addre	SS	
I have read a	and agree to the Lincoln Theatre rental policies and rates	
Signed	Printed	Date
	Return to Lincoln Theatre Via email: * <u>roger@lincolntheatre.org</u> Via mail: Lincoln Theatre, PO Box 2312, Mount Vernon, WA	A 98273