



Event Licensing Questionnaire

For an event to be considered for approval, please complete the application in its entirety. If additions, deletions, or changes become necessary, immediately contact the City College Center for the Arts at (212)650-5362 or email at citycollegecenterforthearts@ccny.cuny.edu.

ABOUT YOUR EVENT

Event Name: _____

Performance Date: _____ Performance Time: _____

Performance Space: _____

Presenter: _____

Presenter Contact : _____

Presenter Address: _____

Presenter Telephone: _____ Presenter Fax Number: _____

Presenter Email: _____

A. BOX OFFICE INFORMATION

1. Have you or your organization previously presented in Aaron Davis Hall?

No Yes If so, when? _____

2. Check all that apply: Reserved Seating General Admissions Free Admissions

Ticket Price: Public \$ _____ Student \$ _____

Seniors \$ _____ Child \$ _____

Groups \$ _____

3. Please indicate any discounts that will be offered along with codes, if applicable.

4. What tickets sales outlet(s) will you use? (i.e. TDF, Groupon, etc.) _____

5. Will all of the tickets be pulled for consignment (i.e. producer/ promoter sells only)?

No

Yes

6. If you choose to take all tickets on consignment, please provide a phone number for ticket inquiries: _____ Telephone: _____

7. What will be the ticket text? _____

8. Requested date: _____

9. Provide a brief description of the event: _____

10. Approximate length of event: _____

B. Food Service

1. Do you plan to have any on-site receptions in conjunction with your event?

Yes

No

2. If, so what time does it start and what time does it end?

Start Time: _____

End Time: _____

3. Catering for public Event (Reception):

Yes

No

Vendor: _____

4. Catering for performer(s), etc.:

Yes

No

Vendor: _____

C. HOUSE MANAGEMENT

1. Merchandise Sales: Yes No

Please Note: 20% commission is collected by City College Center for the Arts.

2. Late seating instruction _____

3. Intermission(s): Yes

No

3. Length of intermission: _____ min

5. Lobby Open: _____

6. House Open for Seating: _____

7. Show starts: _____ 7b. Show Ends? _____

8. Will there be a printed program to be distributed to all patrons?

Yes No

9. How will programs be delivered? _____

10. City College Center for the Arts will provide standard security, custodial & front of house services. Do you have any special security needs or concerns regarding event?

D. TECHNICAL SERVICES

1. Please attach a separate list describing the flow of the day.

2. Please attach a copy of the artist rider. A contract will not be released until proof of insurance has been presented.

3.	Event Date(s)	Start	End
Performance	_____	_____	_____
Rehearsal	_____	_____	_____
Set-up/Load-in	_____	_____	_____
Additional Rehearsal	_____	_____	_____
Load Out	_____	_____	_____

4. EQUIPMENT NEEDS

Microphones Yes No Quantity: _____

CD Player Yes No Details: _____

Audio Recording Yes No

Video Recording Yes No

- House Sound System Yes No
- Video Projector Yes No
- General Lighting Yes No
- Follow Spot Yes No
- Special Lighting* Yes No ***Specs Needed Below**
- Other (Please Specify) _____
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- Lectern Yes No
- Podium Yes No
- Music Stands Yes No
- Conductors Podium Yes No
- Chairs Yes No
- Tables (6') Yes No
- Choir Risers Yes No
- Band Risers Yes No
- Choir/ Orchestra Shell Yes No
- Piano Yes No

5. Are special effects, fire, firearms, pyrotechnics involved?

- Yes No

6. Will you require an orchestra pit for musicians?

- Yes No

7. Will you need stairs from the house (audience) up onto the stage?

- Yes No

