



The Paramount Theatre

139 S. Center St.

PO Drawer A

Goldsboro, NC 27533

(919) 750-1481

Fax (919) 734-0877

www.goldsboroparamount.com

sarchibald@ci.goldsboro.nc.us

RESERVATION AGREEMENT

(A form should be completed for each event)

Date _____

I. Contact Information

Sponsoring Organization _____

Address _____

Contact Name _____

Email address _____

Numbers- business _____ cell _____

home _____ fax _____

Mailing address _____

Secondary Contact _____ number _____

II. Event Information

Event/Name/Title _____

Proposed Date(s): _____

Description: _____

Type of Event: Please choose the description that best describes your event.

_____ **Full Production** with rehearsals, lighting cues, sound cues, scenery, flies, etc.

Examples: Live Theatre – Dance Concert – Opera – Musical

_____ **Single Day Production** with lighting, sound, sound-check, load-in/out

Examples: Music Concert –Variety Show–Stand-up comedy

_____ **Recital** with no special lighting, simply lights up, lights down

Examples: Dance Recital – Piano Recital – Choral Concert

_____ **Lecture/Workshop** with speaker at lectern, slide presentation

_____ **Festival** Examples: Multiple performances

_____ **Self-Contained Event**

Examples: Puppet shows – touring children’s shows

_____ **Other** (please describe): _____

III. Event Schedule

*Indicates a technician will be needed/Technicians will be ready during Start & End Times)

1. **Load-in/Set-Up** – (begins with **FIRST** access to the theatre)

(Remember to write down when you need the Loading Dock)

Date: _____ Start Time: _____ End Time: _____

2. ***Rehearsals/Tech** –please list your proposed rehearsal and tech schedule

Date: _____ Start Time: _____ End Time: _____

Date: _____ Start Time: _____ End Time: _____

Date: _____ Start Time: _____ End Time: _____

3. ***Public Performance(s)/Lecture(s)** – list the dates and curtain/start time

Date: _____ Start/Curtain Time: _____

Date: _____ Start/Curtain Time: _____

Date: _____ Start/Curtain Time: _____

Date: _____ Start/Curtain Time: _____

4. ***School Performance(s)** – please list the dates, starting and running time

Date: _____ Start/Curtain Time: _____ Running Time: _____

Date: _____ Start/Curtain Time: _____ Running Time: _____

5. **Loading Dock** – please list any additional days/dates/times you need loading dock

Date: _____ Start Time: _____ End Time: _____

Date: _____ Start Time: _____ End Time: _____

IV. Ticketing Information

Tickets: This event will be ticketed: _____ Yes _____ No

Seating is: _____ Reserved _____ General Admission

Admission Prices: Full Price: \$ _____

Discounts (optional):

Senior (60+): \$ _____ Student: \$ _____ Child (12&under): \$ _____

Other: \$ _____ (Describe) _____

Ticket Sales Begin (*preferred* start date)

Date: _____

Where will tickets be sold? _____

Will you be using the ticket box office prior to the event? _____

V. Additional Information

Concessions: Do you plan to sell concessions/merchandise?

_____ Yes _____ No If yes, what type _____

Event Management: Stage Manager: _____

House Manager: _____

Director: _____

Advertising: To post your event on the Paramount website, please provide the following information:

Presenting Organization: _____

Title of Event: _____

Genre: Comedy Music Family Dance Theater

Dates: _____

Times: _____

Your website URL: _____

VI. Rules/Regulations

- A. The Paramount Theatre will extend a priority to established local performance groups; however rental dates will normally be assigned on a first come first serve basis.
- B. Rental fees will be based on four hour increments.
- C. All areas must be kept clean and free of clutter.
- D. Rental dates should be made three weeks in advance and will require a 25% non-refundable deposit.
- E. Property of renter should be removed upon completion of the performance.
- F. Storage of production props, equipment etc. will be permitted during the period of rehearsal dates only. The Paramount Theatre, nor its staff, will be responsible for stored items or damages of any kind to stored items.
- G. There will be no smoking permitted in The Paramount Theatre.
- H. Eating or drinking will be permitted in the lobby only. Refreshments can be served and eaten in the lobby, but cannot be taken into the auditorium. Care should be taken in planning refreshments; avoid foods that can be spilled easily and/or require special receptacles or clean-up. No sauces or condiments, please!"
- I. It is the responsibility of the renter to ensure that no children are unattended.
- J. The Paramount Theatre will not be responsible for selling tickets for sponsoring organizations.
- K. There are no animals permitted on the premises of The Paramount Theatre with the exception of service animals as defined by ADA.
- L. Renter is responsible for obtaining, at its own expense, prior to the date of event, all necessary licenses for the performance.
- M. Alcohol permits will need to be obtained by the renter and a copy of the permit will need to be provided prior to event. Per City ordinance, only beer and wine will be permitted in the lobby of the Theatre.
- N. The use of pyrotechnics and smoke effects are not allowed in The Paramount Theatre.
- O. The renter is fully responsible for any damages caused by any person associated with the production under the renter's supervision. If the damage is not covered by liability insurance, the user will be held responsible for the cost. The additional charges will be included in the final invoice for payment.

I have read and understand the rules and regulations set forth by the Foundation of The Paramount Theatre.

Signed _____

Date _____

VII. Fees & Services

(use of dressing rooms & green room is included in fees)

Performances: (Events are based on 4 hour performance time)

\$500.00 for first performance/event in a day

\$250.00 for second performance in same day

Rehearsals/Social Events:

\$200.00 (per event/based on a 4 hour performance time)

Workshop/Presentation:

\$300.00 (per event/based on a 4 hour workshop)

Daily rental: (12 hour period)

\$1,000.00-\$1,500.00 (depending upon needs & staffing requirements)

Technical Services (All technical service requests are due no later than three weeks prior to an event/all technicians must be approved by Theatre Manager)

Sound Technician Required? Yes No Fee- \$ 15. per hour/____ hours

Light Technician Required? Yes No Fee- \$ 15 per hour/____ hours

Fly Technician Required? Yes No Fee- \$ 15 per hour/____ hours

(Technical Director, or representative of The Paramount Theatre, must be present at all times the theatre is in use by the renter. The Paramount Theatre reserves the right to review experience and credentials of technician.)

VIII.CHARGES

<u>Rental :</u>	<u>Fees</u>	<u>Date Received</u>
Performance		_____
Rehearsal	_____	
Technical Services (Total hours_____ x \$15.)	_____	
Total	_____	
Deposit (25% non-refundable-due at request)	_____	_____
Balance Due & Paid (Due first date of rental period)	_____	_____

(Please make checks payable to: City of Goldsboro)
 PO Drawer A
 Goldsboro, NC 27533

I/we hereby agree to abide by all provisions, rules and regulations contained in this reservation agreement of The Paramount Theater.

Representative _____
 Organization _____
 Theatre Director _____ Date _____