

# STRATHMORE

## THE CONCERT HALL AT THE MUSIC CENTER AT STRATHMORE RENTAL APPLICATION

Name of Presenter: \_\_\_\_\_

Primary Contact and Title: \_\_\_\_\_

Contract Executor and Title: \_\_\_\_\_  
(if different than above)

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

Office Phone: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

Date(s) requested: \_\_\_\_\_

Alternate date(s): \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Start Time: \_\_\_\_\_ Length of Program (including Intermission): \_\_\_\_\_

Please give a short description of your proposed event; include program information in detail (i.e., conductor, artist(s), repertoire/works, timings, etc.). Please use additional pages if necessary.

How many people will be involved in the event?

Performers: \_\_\_\_\_

Crew: \_\_\_\_\_

Staff: \_\_\_\_\_

Please list below the names of principal participants, artists, performers, and speakers in your program and their agency, if applicable.

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***Please attach a list of any special considerations required by the artists. If possible, please attach a technical rider outlining the requirements for your event. This must include sound, lighting, set-up and hospitality or catering information.***

## **TECHNICAL REQUIREMENTS:**

*Concert Hall Technical Specifications available online and by request through the Rentals Office.*

Anticipated number of hours for load-in: \_\_\_\_\_

Anticipated number of hours for load-out: \_\_\_\_\_

## **TICKETING:**

This event will be:

☐ For public sale

☐ By invitation only

☐ Free (reservations required)

☐ Other (please attach details)

Please choose ONE type of seating:

☐ RESERVED SEATING

☐ GENERAL ADMISSION SEATING

*Tickets through the Strathmore Box Office are required for all Concert Hall events, regardless of price of entry.*

## **RECEPTIONS / ANCILLARY ACTIVITIES:**

Is there pre- or post-event reception or activity planned? ☐ Yes ☐ No

If Yes, please give a short description of your proposed event:

Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_

Number of Guests: \_\_\_\_\_

Are there any dignitaries, VIP's, etc. anticipated to attend your event? ☐ Yes ☐ No

If yes, please list names, office held.

Is this an Invitation-only event or open to Concert Hall event attendees?

How will guests be invited and access maintained?

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## RECEPTIONS / ANCILLARY ACTIVITIES CONT.:

What type of food and beverage would you like to provide?

*Ridgewells Catering is Strathmore's exclusive food and beverage partner at the Music Center at Strathmore. All food and beverage needs, including receptions, crew meals, and backstage hospitality must be contracted through Ridgewells. Please contact Jeff Wingate, General Manager of Ridgewells at Strathmore for more details. Email: [Ridgewells@strathmore.org](mailto:Ridgewells@strathmore.org); Phone: 301-581-5220*

### PRESENTER INFORMATION:

Presenter is: ☐ Corporation  
☐ Partnership  
☐ Individual  
☐ Other, please describe with attachment.

Federal Identification Number: \_\_\_\_\_ or Social Security Number: \_\_\_\_\_

If Presenter is a corporation

State in which corporation is incorporated:

President:

Vice President(s):

Financial Officer:

If presenter is a partnership

State in which partnership is registered:

Names of Partners:

Please give below the name of Presenter's current bank, account number, and branch address, name, title, and telephone number of an official of this bank as reference:

Please give the below the name, address, and telephone number of the insurance firm that will provide Worker's Compensation and Employer's Liability (including Disability Benefits), Comprehensive General Liability (Personal Injury, including bodily injury, \$3,000,000 per occurrence; and Property Damage, \$1,000,000 per occurrence), Theft and Fire Insurance, and Landlord and Tenant public liability policy:

Broker's name:

Insurance Company:

Address:

Telephone Number:

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Please list three (3) venues where Presenter has presented events within the past 18 months:

Name of Venue	Venue Manager's Name and Title	Telephone Number

*Please attach a program from the above dates. Legible photocopies are acceptable.*

*Any additional information pertinent to your presentation including audio/visual recordings, photographs, reviews, would be appreciated.*

Please Return This Application to Rent to:

**bsiedlecki@strathmore.org**

or

**Ms. Bridget Siedlecki, Director of Operations**

**Music Center at Strathmore**

**5301 Tuckerman Lane**

**North Bethesda, MD 20852-3385**

Fax: **301-581-5201**

Phone: **301-581-5150**