



Camino Real Playhouse Theatre Facility Usage Agreement

Name of Individual or Group: _____
 Contact Person: _____ Phone: _____
 Cell Phone: _____ E-mail: _____
 Address: _____
 City/Zip: _____
 Usage Date/s: _____ Show Time: _____ Arrival Time: _____

Special Requirements (tables, wheelchair space, etc.) _____
PERFORMANCE RENTAL FEES: Mainstage - \$750.00 for 4 hour period / Stage II - \$500.00 for 4 hour period
REHEARSAL FEES: Mainstage - \$100.00 per hour (4 hr min) / Stage II - \$75.00 per hour (2 hr min)
BUY THE HOUSE FEE: Ticket price x 100 less 40 Percent = _____ (No TIX Fees charged)
DEPOSIT: Refundable Security/Cleaning Deposit \$300.00
NON-REFUNDABLE RESERVATION DEPOSIT (will be applied to rental fee) \$350.00

ITEM	AMT. DUE	AMT. PAID	RECEIVED BY	DATE
Refundable Security/cleaning deposit.	\$ 300.00 At signing			
Non-Refundable Reservation Deposit	\$ 350.00 At signing			
Rental Fee – balance due 1 Mo. prior to show/rental	\$			
Light /Sound Tech set up per show	\$150.00 At signing			
Tech Operator per performance	\$75.00/hr.			
Deposit Refunded Date				

City of San Juan Capistrano Reporting Requirements:

*The following information is required by the City of San Juan Capistrano and must be received by Camino Real Playhouse prior to our refunding your deposit.

Attendee Demographics

<u>City of Residence</u>	<u>State</u>	<u>Number of persons</u>
San Juan Capistrano	CA	
	Total	

Basic Usage Rules

No Tape on any surface of the Theatre
No food or drink in auditorium

Clean your area after usage
Complete the reporting information for the City

I agree to the Basic Usage Rules above. I understand the reporting requirements of the City of San Juan Capistrano. I agree to indemnify and hold harmless South Orange County Community Theatre (SOCCT), d.b.a. **Camino Real Playhouse** for any and all claims made, of whatever nature, against SOCCT as a result of my or my group's use of SOCCT facilities under this Agreement.

Signature of Responsible Party: _____ Date: _____