

	CONT	TACT INFORM.	ATION				
PRODUCTION			CONTACT NAME				
		PHONE					
NAME OF ORGANIZATION			E MAH				
RENTAL TYPE (select all that apply)							
SCENERY P			ROPS COSTUMES				
TYPE OF ORGANIZATION (select all that apply)							
EDUCATIONAL		PROFESSIONAL		COMMUNITY			
OUTDOOR VENUE NO				OTHER			
SHIPPING INFORMATION							
ADDRESS					SHIP Т	O RENTER	
			CITY		STATE	ZIP	
PRODUCTION INFORMATION							
DATE NEEDED DATE RETURNED			PERFORMANCE DATES (OPEN-CLOSE) # OF PERFORMANCES				
RENTAL INQUIRY (please be as specific as possible)							
	UE DATE RE	RENTAL T P TYPE OF ORGAN P UE SHIP	CONTACT NA PHONE E-MAIL RENTAL TYPE (select all PROPS TYPE OF ORGANIZATION (select all professional professional professional select all professional profess	PHONE E-MAIL RENTAL TYPE (select all that apply) PROPS TYPE OF ORGANIZATION (select all that appl PROFESSIONAL IIE NON-PROFIT SHIPPING INFORMATION PICK U CITY PRODUCTION INFORMATION DATE RETURNED PERFORMANCE DATES (O	CONTACT NAME PHONE E-MAIL RENTAL TYPE (select all that apply) PROPS TYPE OF ORGANIZATION (select all that apply) PROFESSIONAL IIE NON-PROFIT SHIPPING INFORMATION PICK UP AT ABT CITY PRODUCTION INFORMATION DATE RETURNED PERFORMANCE DATES (OPEN-CLOSE)	CONTACT NAME PHONE E-MAIL RENTAL TYPE (select all that apply) PROPS COSTUMES TYPE OF ORGANIZATION (select all that apply) PROFESSIONAL COMMUNITY UE NON-PROFIT OTHER SHIPPING INFORMATION PICK UP AT ABT SHIP TO STATE PRODUCTION INFORMATION DATE RETURNED PERFORMANCE DATES (OPEN-CLOSE) # OF PERF	

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