

SCREENING REQUEST FORM

Please fax back to: (818) 955-7703 or
e-mail back to screenings@falcontheatre.com
in order to check availability



Today's Date: ____/____/____

Name of person and group: _____

Mailing Address: _____

Email Address: _____

Phone #s: _____ Fax #: _____

Referred by: _____

Title of film or project: _____

TRT of film: _____ Media Format: _____

Rental price includes: 130-seat theatre, 14' x 8' screen, projector, projectionist, house sound system, 4-channel in-house sound mixer, DVCAM, DVD player, house manager in the lobby, parking attendant at our lot one hour prior to start of screening, and one small check-in table in the lobby.

How long would you like to reserve the theatre (this includes from when the first arrives to set up, until the last person leaves, including caterers)? **Check One:**

- before 6pm- 2 hours (\$500): ____ 3 hours (\$700): ____ 4 hours (\$900): ____
- after 6pm- 2 hours (\$800): ____ 3 hours (\$1000): ____ 4 hours (\$1200): ____

Special Equipment Requested (Check all that apply):

DVCAM Deck ____ ; HDCAM Deck (+\$400) ____ ; In-house control of 4-Channel Sound Mixer ____

Proposed rental start time: _____

Proposed rental day/date: _____

Is the date/time tentative? ____ Alternate dates/times: _____

Audience (check one): Invited ____ or tickets sold by Renter ____

Falcon to sell concessions in lobby? YES ____ NO ____ (please note: food & drink are not allowed inside the theatre)

Any catering to be set up in lobby? YES ____ NO ____ (Renter to provide caterer; one banquet table available, caterer to provide tablecloth)

Check One:

Renter to supply public liability insurance certificate? ____

OR purchase from Falcon at additional \$130 per day? ____