ST. MARK'S PERFORMANCE SPACE FACILITY REQUEST

(Form for Groups/Individuals affiliated with UConn)

Date of Event:	Performer Name:					
Contact Person:			il:			
Address:	Cell Phone:					
Mailing Address required for refundable deposits						
Type of Event:	Setup Time:		Concert Start: End Time:			
Reception: \square Yes \square No	If yes, Food/Drink?		Use of Kitchen re	equested?		
Dress Rehearsal Date:		Rehearsal fi	rom:	to		
Building Fee: Waived Reservation Deposit (for both Event and Dress Rehearsal)Refundable: \$50 * Reservation Deposit is refundable under the following conditions: 1) All areas used are tidied and all furniture placed in its original position. 2) No damage incurred to the facilities or musical instruments. 3) Your event starts and ends at the scheduled times. Musical Instrument Usage Request: Yes No If yes, Instrument Maintenance Donation: \$35 *						
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	cate: Piano (Chapel) Organ Piano (Goodwin Hall) Approved:					
Accompanist:	ccompanist: Contact Info:					
Sound Recording: □ <i>None</i>	\square Steve Lyons (UConn) \square	Other	🗆 Basic St. Mai	rks (unmastered)	: \$25 *	
* Reservation Deposit, Musical Instrument Maintenance Donation, and Basic St. Mark's Recording Fee (if applicable) can be waived at the sole discretion of the Minister of Music, Sarah Kaufold, for those members or employees of St. Marks Chapel or frequent volunteers of the St. Mark's Music Ministry. Approved:						
UConn Advisor:	/		Dept.			
Print	red Name /	Signatı	gnature Dept			
This event (including dress rehearsal) is not "Confirmed" until this form and applicable deposits and/or fees have been received by the St. Mark's Office and a confirmation email has been sent to the Contact Person. By signing this form, I agree to accept all liability for any FOR OFFICE USE ONLY						
damages incurred to the facilities used during requested event, including all rehearsals, and agree to promptly reimburse the church for the cost of replacement or repair			Date Submitted	Rec'	d	
			otal Fees/Deposits	Chec	:k#	
of any damaged church property.			□RD □ MIU □ SR	Waived		
		A	Amount Refunded	Chec	:k#	
			Nailed	Initialed		
Signature of Applicant						