

TRIM Reference: _____



QPT APPLICATION FOR HIRE

PART 1: ORGANISATION AND CONTACT DETAILS

Organisation/Hirer: _____

Contact Person: _____

Address: _____

Phone Number: _____

Mobile Number: _____ ABN: _____

Email Address: _____

PART 2: BANKING DETAILS

Account Name: _____

BSB: _____ Account Number: _____

PART 3: EVENT DETAILS

Name of Show/Performance: _____

Date of Show/Performance: _____

PART 4: VENUE HIRE

Main Theatre & Auditorium
Includes Dressing Rooms, Green Room & Laundry
[QPT Seating Plan](#)

Single Room/Area
Please select one option below
[QPT Rooms for Hire](#)

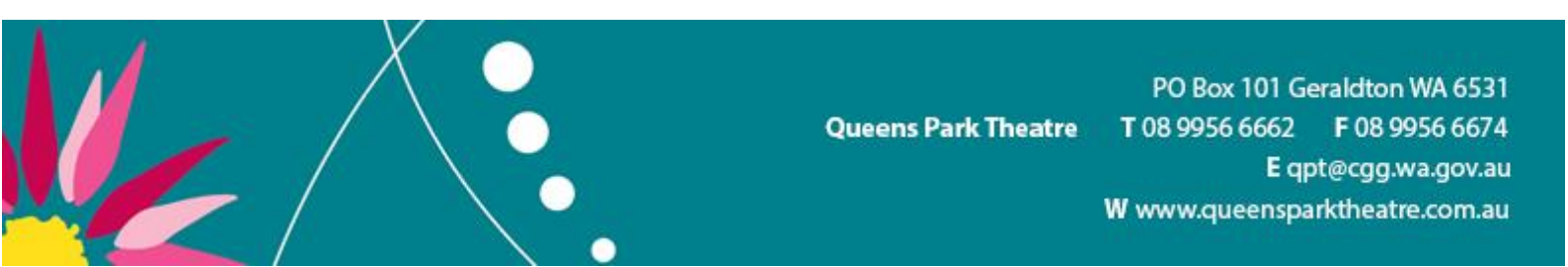
Upper Foyer

Lower Foyer

Mezzanine

Stage Area Only

Outdoor Amphitheatre



PART 5: PERFORMANCE DETAILS

Date	Bump In	Sound Check	Show Start Time	Interval	Show Finish Time	Exit Building

Other Information: *Rehearsals or Technical Rehearsals days or extra days*

PART 6: TECHNICAL INFORMATION

Provide contact details to discuss Technical Requirements

Contact Person:	
Mobile Number:	
Email Address:	

[QPT Technical Specifications](#)

PART 7: FILMING

If you are Professionally Filming, there is a live performance fee charged.

Do you permit Photography and Filming?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you Professionally Filming?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

PART 8: MERCHANISE

Standard set up for merchandise: Table, pin board, chair.

QPT provides staff and payment collection	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hirer provides staff and payment collection	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Specify other equipment if necessary

PART 9: TICKET DETAILS

Billing to appear on Ticket: _____
 Name of Show/Performance: _____
 On Sale Date: _____

The following prices should include all booking fees and GST.

TICKET SELLING PRICE TO PATRONS		
1	ADULT/FULL PRICE	\$
2	EARLY BIRD <i>Specify Cut-off Date:</i> _____	\$
3	CONCESSIONS <i>Please tick Concessions available:</i> <input type="checkbox"/> Pensioner <input type="checkbox"/> Seniors Card <input type="checkbox"/> Health Care Card <input type="checkbox"/> Full Time Student (over 18 years) <input type="checkbox"/> Other, specify: _____	\$
4	FRIENDS OF THE QPT	\$
5	GROUP PRICE <i>Specify Group Size:</i> _____	\$
6	FAMILY 4 Tickets	\$
7	CHILDREN/STUDENTS <i>Under 18 years</i> <i>Please Specify:</i> _____	\$
8	OTHER <i>Please Specify:</i> _____	\$

PLEASE NOTE

The Council is affiliated to the [WA Companion Card Program](#) and requires that a ticket shall be issued at no charge to the holder of a "Companion Card" for their carer.

PART 10: MEDIA, PROMOTOR HOLDS AND COMPLIMENTARY TICKETS

Please specify the number of seats you require for media and guests:

PART 11: CONDITIONS OF HIRE

I/we have received, read and understood the Conditions of Hire for the Queens Park Theatre. Should the above-mentioned booking be approved, I/we agree in all respects to comply with and abide by the Conditions of Hire for the Queens Park Theatre (QPT).

[Conditions of Hire](#)

Signature: _____

Date: _____

OFFICE USE

Received on behalf of the City of Greater Geraldton by: _____

Approved: Yes No

Trim Reference: _____

DEPOSIT

\$ _____

Invoice for deposit will be issued to hirer. No booking will be confirmed until payment of the deposit has been received.

Officers Signature: _____

QPT BOX OFFICE DETAILS

Street Address

QPT Box Office
75 Cathedral Avenue
GERALDTON WA 6530

Postal Address

QPT Box Office
PO Box 101
GERALDTON WA 6530

Telephone Number

(08) 9956 6662

Email Address

qpt@cgg.wa.gov.au