

**PDC Facility Supplemental Request Form**  
*Indian Wells Theater/Oliphant Auditorium Reservations*

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Activity Title: \_\_\_\_\_

Date of Event(s): \_\_\_\_\_

Additional Room(s) Requested:     IW Green Room                       IW Box Office\*  
Time-In: \_\_\_\_\_ A.M. / P.M.    Event Start Time: \_\_\_\_\_ A.M. / P.M.    Time-Out: \_\_\_\_\_ A.M. / P.M.  
Expected Attendance: \_\_\_\_\_

**Type of Event (check one):**

- Student Performance                       Community Performance                       Professional Performance  
 Other: \_\_\_\_\_

**PERSONNEL INFORMATION**

Performers are:

- Children/Youth     Both  
 Adults     There are performance union members engaged

Indicate number of personnel for each category:

# \_\_\_\_\_ in the CAST    # \_\_\_\_\_ in the CREW    # \_\_\_\_\_ of MUSICIANS    # \_\_\_\_\_ of VOCALISTS    # \_\_\_\_\_ of DANCERS

Will you be providing USHERS:     Yes     No    Number of USHERS needed \_\_\_\_\_

Allow seating after show starts?     Yes     No

**PRODUCTION INFORMATION**

Load-in Day: \_\_\_\_\_ Start Time: \_\_\_\_\_                      Load-out Day: \_\_\_\_\_ Start Time: \_\_\_\_\_

Producer/s to provide the following (check all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Lighting plot        | <input type="checkbox"/> CD/show                 |
| <input type="checkbox"/> Lighting cue sheets  | <input type="checkbox"/> Video                   |
| <input type="checkbox"/> Sound equipment plot | <input type="checkbox"/> PowerPoint presentation |
| <input type="checkbox"/> Sound cue sheets     | <input type="checkbox"/> Flash drive             |
| <input type="checkbox"/> CD/pre-show          | <input type="checkbox"/> Gobos (size B)          |

Producer/s request use of all of the following PDC-owned equipment (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Lighting grid                       | <input type="checkbox"/> Wireless microphones (6 available) _____  |
| <input type="checkbox"/> Lighting spot/s (2 available) _____ | <input type="checkbox"/> Wired microphones (4 available) _____     |
| <input type="checkbox"/> Lighting specials: _____            | <input type="checkbox"/> Lavalier microphones (12 available) _____ |
| <input type="checkbox"/> Projectors (2 available)            | <input type="checkbox"/> Microphone stands (5 available) _____     |
| <input type="checkbox"/> Piano                               | <input type="checkbox"/> Monitors (4 available) _____              |

Please indicate special set up needs back stage, Stage Right (SR):

# Prop tables: \_\_\_\_\_  # Chairs \_\_\_\_\_                       Fast change privacy booth

Please indicate special set up needs back stage, Stage Left (SL):

# Prop tables: \_\_\_\_\_  # Chairs \_\_\_\_\_                       Fast change privacy booth

**ADDITIONAL PERFORMANCE INFORMATION**

Will concessions be sold or provided?     Yes: List: \_\_\_\_\_                       No

*Please note: food and/or drink are not allowed in the theater, or in back stage locations other than the designated Green Room.*

Music to be provided during the following:     Pre-show music     Intermission music     Post-show music