



Managed by OM2 s.a.l

Thank you for your interest in Odeon Theater for your special Event.

We are pleased that you are considering renting our unique facilities. In order to answer questions, you may have, we have provided the following information.

Today’s date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

User Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Web site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Community User (as designated by Odeon) Yes \_\_\_\_ No \_\_\_\_\_

Type of Organization:

School ☐ Non-profit ☐ For Profit ☐ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date(s) requested (including rehearsals): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Name of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Primary Contact(s) please indicate preferred method of contact

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

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Type of Event:

🞎 Theatrical  
🞎 Orchestra/Band  
🞎 Dance  
🞎 Public Speaker  
🞎Awards Ceremony  
🞎Film Screening  
🞎Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please give a brief description of the event you are planning to do: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requested Dates (Please be as specific as possible, including all preparation, event start/end time, and removal time that you will need. We recommend that you estimate high to ensure all the time you will require remains available).

Day #1: Date: \_\_\_\_\_\_ Arrival Time: \_\_\_\_\_\_ Departure time: \_\_\_\_\_\_

Please give a brief time line and description for the day’s events:

Day #2: Date: \_\_\_\_\_\_ Arrival Time: \_\_\_\_\_\_ Departure time: \_\_\_\_\_\_

Please give a brief time line and description for the day’s events:

Odeon Theatre Equipment:

Please check all that you plan on using. Some equipment (\*) have charges associated with use. All rates are available on the Rate Sheets found in the User’s Guide.

🞎Main Drape  
🞎Projector/Projection Screen\*  
🞎Front stage lights  
🞎Full stage lights  
🞎Generator  
🞎Wired microphones\* Quantity: \_\_\_\_\_   
🞎Wireless handled microphones\* Quantity: \_\_\_\_\_  
🞎Wireless body microphones\* Quantity: \_\_\_\_\_

**Additional Facilities:**

Please describe any additional facilities that your event may require:

Food Service:   
Please describe any food or beverage service planned for your event. Any food items must be consumed on stairs in front of Theatre or on adjacent patio.

Name:

Company Stamp & Signature

ADRESS: ANTELIAS – MAIN ROAD