

“The TC Circuit (501c3)” Cultural Arts, Wellness, Education & Rental Space
Event Space Application

Please fill out the application according to your event space needs
225 W. Fourteenth St., Traverse City, MI 49684, (231) 421-5963, office@gtcircuit.org

1. Renter

Today's date _____

Last Name: _____ First Name: _____

Address: _____

City : _____ State : _____ Zip: _____

Phone(s): _____

Email: _____

Group or Organization: _____

Describe your organization (if applicable):

2. Additional Contact Person: _____

3. Purpose for use of facility:

4. Space requested: ___ Upper Gallery, ___ Lower Level, ___ Private Studio, ___ Kitchen Space,
(check all that apply OR ___ Whole Facility, ___ Package price, package _____ *see rental agreement*)

5. Requested Rental Dates and Times (must include decorating/set-up & clean up):

Date(s) _____ Start Time(s) _____ End Time(s) _____

___ one time event (___ one day ___ multiple days ___ number of days per month)

___ ongoing (___ weekly ___ bi monthly ___ monthly ___ other _____)

___ 3 months ___ 6 months ___ 12 months (3 month minimum commitment for ongoing program rate) ___ other _____

6. Number of guests/participants expected _____ **7. Number of facilitators/volunteers expected** _____

8. Equipment & Amenities needed : [Note number needed in space or simply check space when appropriate]

___ microphone \$25 (mic & stand, amp, speakers. w/setup)

___ 10 folding banquet tables (6'x2') 75 banquet chairs (\$50 for up to 10 tables w/chairs.) *Table covers not included*

___ Event 100 chairs stadium seating with up to 3 tables for food and merchandise. (\$50)

Kitchen Items: All items \$25 total

___ 6 water pitchers ___ 3 coffee thermoses, ___ coffee maker (filters provided, you must provide coffee), ___ refrigerator ___ freezer

***Amenities and equipment: Total Fee. \$** _____

Equipment / Items you are bringing in: *ie stage lights, stage, props*

9. Additional Rental Needs / Requests - give details as needed

___ Food and beverages (plan to have caterer? associated needs?) ___ special set up or electrical needs (for food or other).

___ music and volume levels; (use of stereo, mics, etc) ___ signage ___ decorations. ___ other similar materials

___ delivery of equipment or materials ___ alcoholic beverages?

___ Use of Kitchen (limited to cooling or warming already-prepared food items)

___ animals needed specifically for the use of a person with a disability or animals that are used for instructional purpose

Other considerations or terms of use requested:

Sterno only, NO candles or any other type of flame; no tacks, nails, tape, wire, or staples - NO glitter, sparkles, rice.

