DreamWrights Rental Application Form

Today's Date: _____ Rental Date(s): _____ Time: _____

Renter: _____

Renter's Address: _____

_____

Renter's Phone (day) _____ (evening) _____

Renter's Representative: _____

Specified Space: _____

Purpose of Use: _____

Total Fee (including Security Deposit) : _____ 20% Deposit: _____

Balance Due 2 weeks prior to event: _____

FEE CALCULATION:

Space Required: _____

Fee: _____ (4 hr. rate + addt'l 1 hr. rate, if needed)

Staffing Fee: _____ (total hours x $5.00 per hour)

Technician Fee: _____ (total hours x $10.00 per hour)

Security Deposit: _____ $100. _____

TOTAL: _____

_____ _____

DreamWrights Representative Date

_____ _____

Renter's Representative Date