



Application for Facility Lease Agreement

Please print clearly, complete all sections, and sign. Return to address listed below. Thank You.

Name of Organization _____ Date _____

Address _____

City _____ State _____ Zip _____

Contact Person _____

Phone _____ Fax _____ Cell _____

Email Address _____

Website _____

Event Name _____

Type of Event _____

Applicant is: _____ Individual _____ Partnership _____ Corporation

Company is incorporated in: Country _____ State _____ Country _____

Name & titles of officers or partners: _____

NYS Permit to Operate a Show: # _____ NYS Sales Tax: # _____

Will admission be charges? _____ Yes _____ No If yes, how much? _____

Set-up Dates: _____

Set-up Hours: _____

Event Dates: _____

Event Hours: _____

Move-Out Dates: _____

Move-Out Hours: _____

Additional Facility Needs, if any: _____

Additional Services Needs, if any: _____

Concessions/Catering Needs, if any: _____

Business References:

1. _____

2. _____

3. _____

Prior Shows/Experience (Please list names and locations): _____

History of your group or business: _____

Other pertinent information: _____

I certify that the information in this application is complete and true to the best of my knowledge. It is also understood that this is an application for space and dates only, not a contract. The Premier Annex Gallery reserves the right to reject any application.

Name of Business: _____

Signature _____

Title _____

Date _____