

WAV Venue Request Form

Please fill out, and fax or deliver to WAV main office. Fax: 805.641.0476. See Contact Page of website, WAVartists.com for address and map of office location. If the office is closed place the form inside the rent drop box.

Name of organization:	Phone:
Name of individual:	Phone:
Email:	
Time and Date Set Up:	
Time and Date Finished:	
Location of Event:	
Type of Event: <input type="checkbox"/> Visual Arts <input type="checkbox"/> Performing Arts <input type="checkbox"/> Mixed <input type="checkbox"/> Educational <input type="checkbox"/> Community Gathering <input type="checkbox"/> Other	
Event type: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Invitation Only	
Who is using the space: <input type="checkbox"/> WAV Resident <input type="checkbox"/> SHORE Resident <input type="checkbox"/> Other <input type="checkbox"/> Collaboration WAV resident & Other <input type="checkbox"/> Individual <input type="checkbox"/> Group	
Detailed description of event, including equipment description:	
Will alcohol or food be served?: Food: <input type="checkbox"/> Yes <input type="checkbox"/> No Alcohol: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, will there be a charge for food or alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No	
Cost to attend:	
Estimated number of attendees:	
Additional requests:	

Office Use Only
Date Received _____
Approved <input type="checkbox"/> yes <input type="checkbox"/> no
Notes:

Please inquire at the WAV office about the required refundable deposit and other necessary permits and insurance for the use of the WAV venue.

WAV is a Leed certified building and a non-smoking facility. Please inform your guests that if they choose to smoke they MUST cross the street to fulfill the required "25 ft. from the building" rule.