

2018-2019

Application



SKyPAC

Southern Kentucky
Performing Arts Center

CURTAINS UP!

The mission of the Southern Kentucky Performing Arts Center (SKyPAC) is to provide exceptional artistic and educational experiences by presenting, producing, and exhibiting the highest quality art.

List three performance dates: _____

Start Time of Performance: _____ am/pm End Time: _____ am/pm

Set-up Time: _____ am/pm Tear Down Time: _____ am/pm

(must be complete by midnight)

List your tech needs for this performance (ex. sound technician, lighting technician, and design needs):

Will your performance require a set? If yes, please describe (below):

Rehearsal Time (if desired): Date _____ Time _____ am/pm

Approximate number of guests: _____

Admission Charge: Yes or No If Yes, indicate ticket price(s): _____

**Note that SKyPAC Ticket Office will manage all event ticket sales.*

CONTACT INFORMATION:

Teacher: _____ Phone: _____

Principal: _____ Phone: _____

It is understood and acknowledged SKyPAC is a non-profit organization whose sole business purpose is the performing and visual arts. The undersigned hereby agrees to waive, release, discharge and forever hold harmless SKyPAC, its employees, directors, shareholders, from and against any and all claims, demands, liabilities to third parties including but not limited to, liability arising from any losses, liabilities, claims, demands, damages, suits or expenses incurred or which may be incurred as a result of the undersigned's use of the SKyPAC facilities.

A copy of an appropriate insurance certificate naming SKyPAC as additional insured will be required.

Name and title of school authorized signatory (please print)

Signature

DEADLINE: Friday, July 27, 2018
Mail completed applications to:
SKyPAC
Attn: Education Department
P.O. Box 748
Bowling Green, KY 42102
By Fax: (270) 904-0842
By Email: TDeaton@TheSKyPAC.com