

**APPLICATION FOR USE OF STUDIO SPACE  
Ballet Austin -- Butler Dance Education Center**

Company	
Contact	
Address	
Phone	
Fax	
Email	

For-profit       Non-profit

**SPACE REQUEST**

- |  |   |
|--|---|
| <input type="checkbox"/> AustinVentures Studio Theater (A) | <input type="checkbox"/> Shiftlet (F)         |
| <input type="checkbox"/> Armstrong/ Connelly (B)           | <input type="checkbox"/> Kodosky (G)          |
| <input type="checkbox"/> AdlerLand (C)                     | <input type="checkbox"/> Community Board Room |
| <input type="checkbox"/> Studio D                          | <input type="checkbox"/> Citiview Lounge      |
| <input type="checkbox"/> Studio E                          |   |

**EVENT DESCRIPTION (please fill in below)**

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**SCHEDULE INFORMATION**

Requested Dates	
Load in date/ time	
Rehearsal dates/ times	
Performance dates/ times	
Load out date/time	
Length of performance	

**TECHNICAL NEEDS (please describe below)**

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**TICKETING & OTHER SERVICES**

Anticipated Attendance	
Is your event free of charge?	
Proposed ticket price	
General or assigned seating	
Refreshment or Merchandise sales?	
Reception? If so, please describe	
Catering?	
Alcohol?	

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