



211 Bronson Avenue
Ottawa, Ontario K1R 6H5

Date Form Completed:

DD/MM/YEAR

Rental Application for Theatre, Mac Hall and Meeting Rooms

Telephone: 613-237-5550

Web: www.bronsoncentre.ca

Fax: 613-237-4874

Email: bci-rentalservices@bronsoncentre.ca

(Rev. April 21, 2017)

Rental Group Information: ALL FIELDS REQUIRED

Have you rented from the Bronson Centre before? no yes. If yes, please indicate the date: _____

Organization Name: _____

Address: Street: _____ City/Prov.: _____

Postal Code: _____

Contact Information

Contact Person: _____ Telephone: _____

E-mail: _____ Other (fax or cell): _____

Is this group a registered non-profit organization? Yes No Registration #: _____

Room and Date/Time Details:

Please indicate below the rental space(s) you are requesting, subject to availability.

Theatre _____
(864 seat capacity)

Mac Hall _____
(200 seat capacity with stage)

Community Room (#212) _____
(32' x 24' – 40 seat capacity)

Nepean Room (#103) _____
(40' x 29' – 60 seat capacity)

Room 221 _____
(40 seat capacity)

Room 222 _____
(30 seat capacity)

Grey Court (#109) _____
(32' x 23' – 40 seat capacity)

Rideau Room (#110) _____
(32' x 24' – 40 seat capacity)

Room 213 _____
(20 seat capacity)

106-A _____
(15 seat capacity)

Date(s) and time(s) requested: *Please use a separate paper if necessary.*

IMPORTANT: INCLUDE SET UP AND CLEAN UP TIME

| Room Requested | Date (REQUIRED) | Time (REQUIRED) |
|----------------|-----------------------|--------------------------------------------------------|
| Example: 109 | Example: June 1, 2099 | Example: <u>2 p.m.</u> am/pm to Example: <u>8 p.m.</u> |
| | | From am/pm to am/pm |
| | | From am/pm to am/pm |
| | | From am/pm to am/pm |
| | | From am/pm to am/pm |

Please fill out details of your booking on the reverse side of this page.

ENSURE THIS PAGE IS COMPLETE.

Equipment requested:

Chairs (number) _____ Tables (number) _____

Audio visual equipment is available for your event. Please inquire about items and cost, and indicate your needs ASAP.

Event Information:

What type of activity will you be hosting?

Meeting____Conference____Workshop____Rehearsal____Play____Concert____Other ____

Please describe the activity: _____

How many people will be attending? _____

How many staff and/or volunteers will be working at this event? _____

Respect other tenants, keep participants (including children) and activities contained within the designated rented areas. Respect City of Ottawa noise bylaws.

Theatre Rentals only:
Is there a fee to attend this activity? Yes____No____ If yes, what is the fee? _____ Where
will the tickets be sold? Ticketmaster_____(All commercial and on-line ticketing MUST use Ticketmaster.)
Other (please indicate) _____
A facility fee applies to all theatre rentals. Where applicable a merchandise fee may also apply. Please see rates page.

Mac Hall Rentals only:
Do you plan to sell/provide food and/or beverages? Yes____No ____
(A valid L.C.B.O. liquor license must be posted in the rental space if there is alcohol on the premises. You are responsible for compliance with the terms of your L.C.B.O. Special Occasions Permit.)
Please Note: Your staff or volunteers must be prepared to evacuate the participants in the event of a fire alarm or any other emergency. In the case of a fire alarm no one is permitted back into the building until the fire department indicates it is safe to re-enter the building. **Security and2 Proof of Insurance may be required for your event. An over-booked event can be shut down by the fire marshal; do not over sell your event.**

To confirm a booking: - Completed application form plus non-refundable deposit (see rates page).
- Payment in full required 30 days prior to event
For cancelled bookings: - 30 days prior to event – loss of deposit only
- Within 30 days of event – no refund
An impression of a valid credit card and/or a security/damage deposit may also be requested.

Deposit payment: Visa, American Express, MasterCard, debit, cash or cheque payable to the Bronson Centre

Type of Card: _____ Name on the card (please print): _____
Card Number: _____ Expiry Date: _____ Month _____ Year

Name of person completing this application: _____

Signature REQUIRED: _____ Date: _____
(person over 21)