

# First Floor Studio Use Application

Please allow 3-5 business days for GAC approval



## Applicant Information

Date of Application \_\_\_\_\_

Description of Use (Please be Specific)

\_\_\_\_\_

\_\_\_\_\_

Date of Requested Use

Time(s) of Requested Use

Name or Name of Responsible Person if Group

Mailing Address

City

State

Zip

Primary Phone

Alternate Phone

Email

## Meeting/Studio Use Rate Chart (Must be Approved)

Circle One	Circle One	Circle One		Hours	Total
Individual Art-Related Activity	Member	Not For Profit/Sales	For Profit/Sales	_____	_____
		Free	\$45 hr.		
Group Art-Related Activity	Member	Free	\$20 hr.	_____	_____
	Non-Member	\$15 hr.	\$45 hr.	_____	_____
Individual or Group Non-Art Related Activity	Member/ Non-Member	\$40 hr.	\$85 hr.	_____	_____

Estimate # of Attendees: \_\_\_\_\_ Amount Due: \_\_\_\_\_

I have read and agree to comply with the Rules for GAC First Floor Studio Use. I understand that I am responsible to end my session on time and for cleanup, returning studio items to their proper places, and that I am responsible for the proper use of the studio space. Studio use privileges subject to suspension for failure to comply.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## Office Use Only

Approved as Requested \_\_\_\_\_

Approved as Amended \_\_\_\_\_

Not Approved \_\_\_\_\_

Board Representative: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date