

# First Floor Studio Use Application

Please allow 3-5 days for GAC board approval.

Office Use Only
Date of Activity

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

Date of Requested Use \_\_\_\_\_ Time of Requested Use \_\_\_\_\_

Brief Description of Requested Use \_\_\_\_\_

\_\_\_\_\_ Estimate # of Attendees \_\_\_\_\_

Name or Name of Responsible Person if Group			
Mailing Address	City	State	Zip
Primary Phone	Alternate Phone	Email	

## Meeting/Studio Use Rate Chart

<u>CIRCLE ONE</u> Art-Related Activity One Person <i>(Applies to non-profit memberships)</i>	<u>CIRCLE ONE</u> Member	<u>CIRCLE ONE</u>			
		Use: Not For Profit/Sales	For Profit/Sales	Hours	Total
		<b>\$5 hr.</b>	<b>\$15 hr.</b>	_____	_____
	Non-Member	<b>\$20 hr.</b>	<b>\$30 hr.</b>	_____	_____
Art-Related Activity Group	/	Use: Not For Profit/Sales <b>\$25 hr.</b>	For Profit/Sales <b>\$35 hr.</b>	_____	_____
Non-Art Related Activity Individual OR Group	/	Use: Not For Profit/Sales <b>\$40 hr.</b>	For Profit/Sales <b>\$55 hr.</b>	_____	_____

          
Total Hours
          
Amount Due

Paid by:   Cash    Check    Card

\_\_\_\_\_  
Received by
\_\_\_\_\_  
Date

**I have read and agree to comply with the policies 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

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Approved as Requested _____
Not Approved _____
Approved as Amended _____