



EVENT RENTAL APPLICATION

Event Date:	Set-Up Time:	Start Time:	End Time:	Wrap Up Time:
Event Name:				Est. # of Guests:
Single Event or Multiple Days/Nights:				
Description of Event:				
<p>Tables / Chairs Required? YES / NO If YES how many?</p> <p>Special Lighting Required? YES / NO</p> <p>La Vie Website Inclusion? YES / NO</p> <p><i>For the best event pre-planning and production please provide, a detailed plan and desired schedule for specific times and aspects of your event via email: laviedance325@gmail.com.</i></p>				
Client(s) / Company Name:				
Address:		City:	State:	Zip:
Contact Name:				
Phone:		Email:		

TO BE COMPLETED BY LA VIE:

TOTAL HOURS:	_____ hrs	STUDIO RENTAL COST:	\$
DEPOSIT:	\$		
PAYMENT METHOD:			
Cash	<input type="checkbox"/>	Check	<input type="checkbox"/>
Credit Card	<input type="checkbox"/>	Paypal / Venmo	<input type="checkbox"/>
DRIVERS LICENSE / ID # _____			