



**Coralville Center**  
*for the Performing Arts*  
1512 7th Street, Coralville, IA 52241

## **CORALVILLE CENTER FOR THE PERFORMING ARTS**

### **Venue Rental Request Form**

*Please complete one form for each requested engagement or run.*

**Organization Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone (day):** \_\_\_\_\_ **Phone (evening):** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Name or Type of Performance:** \_\_\_\_\_

**Full Stage**\_\_\_\_ **Partial Stage** \_\_\_\_ **Apron Only**\_\_\_\_

**Is the organization a 501c3 non-profit with an annual budget below \$100,000?** \_\_\_\_\_

*(These organizations may be eligible for subsidized rental rates, subject to fund availability)*

**Preferred Date(s):** \_\_\_\_\_

**Second Choice Date(s):** \_\_\_\_\_

**Third Choice Date(s):** \_\_\_\_\_

***Please return completed form to Megan Flanagan***

Mail: Coralville Center for the Performing Arts, 1506 8<sup>th</sup> Street, Coralville, IA 52241

Phone: 319-248-1868

Fax: 319-248-1899

Email: [mflanagan@ci.coralville.ia.us](mailto:mflanagan@ci.coralville.ia.us)