



# JERUDONG INTERNATIONAL SCHOOL ARTS CENTRE

THE PLACE FOR THE ARTS IN BRUNEI

## VENUE REQUEST FORM

Company / Individual Name:	Company / Individual Address:
Contact Person:	Tel No:
Email Address:	Event /Production Name:
Actual Date(s) of Event:	No of people expected to attend:
Event description:	

MAIN EVENT VENUE
<input type="checkbox"/> Auditorium
<input type="checkbox"/> Foyer
<input type="checkbox"/> Gallery
<input type="checkbox"/> Conference Room
<input type="checkbox"/> Studio Theatre / Orchestra Rehearsal Room

Date required (Rehearsals & Event Date)	Time Required	
	From	To

AUDI-VISUAL REQUIREMENTS	AV Support (pls tick)	Date required (Rehearsals & Event Date)	Time Required	
			From	To
For set-up				
For rehearsal				
For actual event				

**IT Resources/AV Equipment Required:**

- |  |   |  |                                   |
|--|---|--|-----------------------------------|
| <input type="checkbox"/> Computer      | <input type="checkbox"/> Projector          | <input type="checkbox"/> Screen            | <input type="checkbox"/> Speakers |
| <input type="checkbox"/> Clicker mouse | <input type="checkbox"/> Network connection | <input type="checkbox"/> Internet          |                                   |
| <input type="checkbox"/> PA System     | <input type="checkbox"/> Cordless Mic.      | <input type="checkbox"/> 3.5mm audio cable |                                   |

Other (Please specify):

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**CONTACT DETAILS:** artscentre@jis.edu.bn Phone: +673 2 411000 ext 5104



# VENUE REQUEST FORM

## REFRESHMENT /CATERING REQUIREMENTS

No. of people: \_\_\_\_\_

Coffee & Tea     Water     Water Dispenser     Biscuits     Other – please specify

Any VVIP?     Yes     No    No of VVIP: \_\_\_\_\_

Empire catering required?     Yes     No

Please state the type of food you would like to order:

## GOVERNMENT APPROVAL FOR EVENT

Yes     No     Not applicable

## VENUE SET UP

Specific plan required?     NO     YES (Please attach to this form)

Podium required?     NO     YES

No of tables needed: \_\_\_\_\_    No of chairs needed: \_\_\_\_\_

Other special arrangements required? Please provide details below:

## ADDITIONAL EVENT REQUIREMENTS

Will tickets be sold for this event?

NO     YES, please provide details

## ANY OTHER INFORMATION

*Please provide any additional information you feel may be appropriate regarding this event.*

## SIGNATURE

*Please sign to confirm the above information is correct. Thank you.*

*Company Stamp*