

# RENTAL APPLICATION

**ATTUCKS THEATRE**

DATE \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

PRESIDENT \_\_\_\_\_ TRAFFIC MANAGER \_\_\_\_\_

NATURE OF BUSINESS \_\_\_\_\_

SPECIAL INVOICING INSTRUCTIONS \_\_\_\_\_

## FINANCE REFERENCES

BANK NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

ACCOUNT # \_\_\_\_\_ OFFICER IN CHARGE \_\_\_\_\_

## BUSINESS REFERENCES

BUSINESS NAME	COMPLETE ADDRESS	PHONE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**List some of the events you have promoted starting with most recent. Include agents you have worked with.**

ACT	VENUE	DATE PERFORMED	VENUE CONTACT	VENUE ADDRESS AND PHONE NO.
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

I certify that all the information on this form is correct. I fully understand your credit terms and agree to the proper payment.

PAYMENT TERMS: A SERVICE CHARGE OF 1.5% WILL BE ADDED TO INVOICES NOT PAID IN 30 DAYS.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT'S SIGNATURE/TITLE

**RETURN TO:** ATTUCKS Promotions  
P. O. Box 1808  
Norfolk, Virginia 23501  
757-664-6464 FAX 757-664-6990

**THE ABOVE SIGNATURE AUTHORIZES BANK TO RELEASE CREDIT INFORMATION TO NORFOLK SCOPE**