



# VACAVILLE PERFORMING ARTS THEATRE

BOX OFFICE: (707) 469-4013  
1010 ULATIS DRIVE - VACAVILLE CA 95687

MANAGER'S OFFICE: T (707) 469-4015 - F (707) 449-6113

*Please fill out this form completely and forward it to your insurance provider. Proof of insurance should be provided by fax or mail one month prior to the use of the Theatre.*

1. **To:** (Insert the Insurance Company name or contact person.)

**Today's Date:**

2. **Renter** (Person or Organization).

3. **Event Name.**

4. **Name of Person Responsible for Contract.**

5. **Phone # of Person Responsible for Contract.**

6. **The venue where this event will take place.**

7. **These are the dates, including event days and all rehearsals, that my group or I, the Renter, will occupy the Theatre per my contractual agreement** (month/day/year).

## SPECIAL NOTICE TO INSURANCE PROVIDER

The Renter Group must provide proof of general coverage liability insurance in an amount not less than \$1,000,000 (one million dollars) **naming the City of Vacaville and VenueTech Management Group as additional insured.** The proof of insurance must be received by the Theatre in advance of all use days, as worded, in order for this event to take place on our premises. Please send this by fax or mail one month prior to the first use day.