



THE THEATRE PRACTICE
54 Waterloo Street, Singapore 187953
TEL: (65) 6337 2525 FAX: (65) 6358 2565
www.practice.org.sg

Practice Tuckshop Venue Rental Request Form

Section A: Hirer's Particulars

Name of Company/Organisation:

Type of organisation (tick where applicable)* :

- Non-profit organisation Registered charity
 Institution of Public Character Others (please specify) :

Address:

Tel:

Fax:

Email:

Contact Person:

Designation:

** Please submit an authorised document that can prove your status as a NPO, charity or IPC.*

Section B: Event Details

Title of Event:

Nature of Event:

Number of Participants:

Booking Date & Time:

Is this a closed-door event? (tick where applicable)*:

Yes

No

I, the undersigned, verify that the above information is accurate and I understand that this venue rental request form does not in any way constitute a booking agreement and the date(s) requested will be subject to availability.

Signature: _____ Signed by: _____ Date: _____

Kindly return the completed form to: [**tuckshop@practice.org.sg**](mailto:tuckshop@practice.org.sg)

The Theatre Practice has the discretion to retain all materials, papers and images submitted and are not liable for any unsolicited proposals and material.

We will respond to your request as soon as possible.