



DC COMMISSION ON THE ARTS & HUMANITIES

FY 2015 RENTAL REQUEST FORM FOR THE HISTORIC LINCOLN THEATRE

Date:

Contact Name:

Organization:

Address:

Email:

Phone:

Applicant Type (*Select all that apply*):

Non-profit

Arts Organization

Community Organization: ANC, Civic Association, etc.

Educational Institution

DC/State/Federal Government Agency

Other

Event Title:

Event Type (*Select one*):

Arts Education Program

Non-Arts Education Program

Event Date:

Event Time:

Projected Attendance:

Event Description:

Event Marketing Plan:

Event Goals - Include objectives and communities served:

Event Budget:

Total Project Budget			
Amount Requested from DCCA			
Other Funding Sources	TOTAL		
1	Source Name		Amount
2			
3			
Itemized Budget Narrative			

Partner(s) *(Select all that apply)*

- Community 501 (c) 3, ANC, Civic Association
- Government: DC Agency or Federal
- Educational Institution
- Arts Organization
- Corporate Entity, Private Industry
- Regional, National, International Organization or Government
- Direct Select/Special Initiatives (Public Art Master Plan)
- Other
- None

Partner Name:

Partnership
Description:

If additional partners are applicable, please add attachments.

Work Sample:

Provide an artistic work sample that clearly demonstrates the program's artistic content. Use the space below to list the work sample and description of the artistic content.

Special Needs:

Return this completed form and work sample **VIA EMAIL** with the subject line of **“Rental Request Form for the Historic Lincoln Theatre”** and the **Organization's Name**. Applicants will be notified of the status of their application no later than two (2) weeks after receipt.

Send to:

Darlene Brown, *Facilities Liason*

Darlene.Brown2@dc.gov or click the **SUBMIT** button below.

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For more information call **202-724-5613**