

## **MALTA SOCIETY OF ARTS**

Palazzo de La Salle, 219 Republic Street, Valletta VLT 1116 Tel. 21244400, 21244339 Email: info@artsmalta.org\_\_\_\_

## HIRE OF CONCERT HALL/GALLERIES/COURTYARD

## **APPLICATION FORM - EVENTS**

Applicant's D								
Name of Applicant	t			MSA Member	YES	NO	Membership No.	
Name of Organisation / Company (if applicable):				Co. Reg No. (if applicable):				
				V.O. No. (if applicable):				
Address:				I.D. No.				
				Tel. No.				
				Mobile No.				
Post Code:				Email address:				
Event Details								
Title of Event				Duration of Event (days/weeks/months)				
Type of Event	rpe of Event Art Exhibition				Duration of Booking (including preparation/assembly/dismantling)			
Concert				Preferred Event date/s				
	Conference			Range of possible dates Fro			То:	
	Other			of Event (Months)	f Event (Months)			
Brief description of Event (max. 30 words):					·····			
			Gallery 1		Conference Room (seats 20)			
		Gallery 2		Concert	Hall (seats 140-150)			
		Gallery 3		Courtyard (seats 80)				
			Gallery 4		Basement Vaults			
Additional items required								
Piano	PA	Projector	Music Stand/s					
Table/s	Chairs	Catering	Additional Lighting					
Applicant's C								
Applicant's CV / Statute (in the case of organisations)								
Artist's CV	of previous wo	rks (min 10 pics)						
		mple photographs o ibition applications)						

Payment Details (to be completed by M	/ISA) * indicative pricing		Amount
Use of Art Galleries	€100 per Hall per V	Veek	
Use of Concert Hall	€150 per Event		
Use of Conference Room	€100 per Event		
Use of Courtyard / Basement vaults	€100 per Event		
Hire of Steinway Grand Piano	€ 50 (in Concert F	fall only)	
Hire of Public Address system	€ 50		
Hire of Projector & Screen	€ 50		
Lights & Sound operator	€ 25 / hr		
Custodian Overtime hours	€12/hr (weekdays)	€15/hr (weekends)	
Piano-tuning	€ 60		
Other Expenses (catering, etc.)			
		Total	
Deposit paid Cheque No.	Cash	Date	

<sup>\*</sup> Reduced rates for students, educational and charitable organisations, etc. may apply

Applicant's Declaration	
I have completed this Application Form after reading and agreeing to the Conditions of Agreement	
Applicant (Name in Block Letters)	Signature
obo (Company / Organisation if applicable):	
I.D. No.	Date:

## NOTE:

Applications may be submitted all year round (see applicable Closing Dates in Regulations)

All applications will be referred to the Arts Advisory Board on the next Review Date (see Schedule in Regulations).

Applications will be processed by the Arts Selection Panel and the Applicant will be informed within 5 weeks of the Closing Date.

The decision of the Arts Advisory Board and endorsement or otherwise of the MSA Board is final.

For official use				
Application received date:	Endorsed by MSA Board on			
Application received by:	Approved Not approved			
Referred to Arts Selection Panel on:	Result communicated to applicant on:			
Evaluation Date by Arts Selection Panel:				