**Matthew Flinders Theatre**

#### Hirers Technical Requirements Form

**Hirers must complete this form & return it to the Matthew Flinders Bookings Coordinator at least *four weeks* prior to the commencement of your bump in.**

**Completed forms should be returned to:**

**Kathy Wyatt**

**School of Humanities**

**Flinders University**

**GPO Box 2100**

**Adelaide SA 5001.**

**Phone: 08 8201 2586**

**Fax: 08 8201 2556**

# Technical Enquiries should be directed to Andrew Bailey, Theatre Manager. He can be contacted at andrew.bailey@flinders.edu.au or on 8201 2488.

|  |  |
| --- | --- |
| COMPANY NAME |  |
| PRODUCTION  |  |
| BUMP IN DATES |  |
| DATES OF PERFORMANCES |  |
| BUMP OUT DATESDURATION OF PERFORMANCEESTIMATED AUDIENCE NUMBER(Maximum seating capacity is 426)  |  |
|  |
|  |

#### PART 1

#### 1. STAGE PLANS

Please show positions of all scenery and props on a stage plan (or plans) with a legend.

If you have a particularly busy production or concert you should use a separate plan with a legend for each major act.

Please designate the stage position of all musicians, and identify placement of music stands, microphones (if known), lecterns, banners, rostra, screens, etc.

#### 2. SEATING DETAILS

Please confirm the following details:

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| --- | --- |
| Do you require Mixer Seats within the body of the auditorium? Seats must be held from sale |  |
| Do you require any other seat holds? eg. Camera positions, tablesSeats may need to be held from sale  |  |

**Please Note; Seats held must match ticketing sales.**

#### 3. PERFORMANCE INFORMATION

|  |  |  |
| --- | --- | --- |
| Type of Performance:  | Eg: variety concert / drama / musical / ballet / corporate presentation / recital/ dance concert/ awards presentation/ 35mm movie / callisthenics concert…. |  |
| Running Time of Performance: | Duration of Act 1 / first half |  |
|  | Duration of interval  |  |
|  | Duration of Act 2 / second half |  |
|  | Duration of 2nd. interval where applicable |  |
|  | Duration of Act 3 where applicable: |  |
| Number of artists in the company: | Male: |  |
|  | Female: |  |
| Number of crew/staff: |  |
| Technical Management | Name of Hirer’s technical representative or Production Manager  |  |
|  | Position: |  |
|  | Mobile Phone: |  |
|  | Landline: |  |
|  | Email: |  |
| Stage Management | Will you supply a Stage Manager?  |  |
|  | If YES…. Name of Stage Manager |  |
|  | Mobile Phone: |  |
|  | Landline: |  |
|  | Email: |  |

#### 4. PRODUCTION SCHEDULE:

Please provide a full production schedule detailing stage activity and the staff that you require from the theatre as an attachment to this completed form.

If you are **unable to supply a production schedule** as an attachment please complete the following grid to the best of your knowledge:

In order to comply with OHS&W requirements and terms and conditions of the organisations Enterprise Bargaining Agreement, please ensure the following:

Crew shifts must not exceed 14 working hours per day.

Crew shifts must not exceed 5 hours between meal breaks. Meal Breaks must fall between 1200-1500 and 1700 –2000.

Crew are given 10-hour overnight breaks between shifts.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Number of Mechanists | Lighting Operator | Number of Floor Electricians | Number of Follow Spot Operators | Sound Operator | Number of Floor Sound Technicians | Stage Management |
| **Bump In**Start time:Finish Time |  |  |  |  |  |  |  |
| **Sound Check**Start Time:Finish Time |  |  |  |  |  |  |  |
| **Rehearsal**Start Time:Finish Time |  |  |  |  |  |  |  |
| **Performance**Start Time:Finish Time |  |  |  |  |  |  |  |
| **Bump Out**Start Time:Finish Time: |  |  |  |  |  |  |  |

#### 5. STAGING ARRANGEMENTS FOR YOUR PRODUCTION

Note: MFT does not have “flying” facilities, so all set pieces must be free standing. Storage and wing space is very limited, please consider this when planning your performance.

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| --- | --- | --- |
| Scenery | Will you be bringing any scenery? |  |
|  | Have you attached a stage plan showing positions of scenery? |  |
| Stage Depth | Depth of performing area required: |  |

#### 6.STAGING ITEMS

Please indicate if you require any of the following AND ***please show positions on plan.*** (Additional charges apply).

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| --- | --- | --- |
| **ITEM** | YES or NO | **Details:** |
| Is the house curtain to be used |  |  |
| Music stands |  |  |
| Lectern |  |  |
| Piano |  | Location(s) required: |

#### 7. LIGHTING

|  |  |
| --- | --- |
| Do you require the use of the theatre’s stock lighting equipment? | Yes or No |

If **YES** please answer the following:

|  |  |
| --- | --- |
| Will you be using the **“standard rig”** lighting configuration or will you be providing a specific lighting design? |  |
| Name of your **lighting designer** or person responsible for lighting decisions:Phone number: |  |
| **Follow spots:**Do you require the use of the “in-house” follow spots (2 available)If so how many follow spots: |  |

|  |  |
| --- | --- |
| Do you require us to provide any **“non-standard rig”** lighting equipment? (Hire charges apply)Smoke Machine:Fog Machine:Hazer:Strobe:Ultra-violet lights:Mirror Ball:Moving lights:Side Booms or Ladders:Par cans: |  |
| Are you planning to use any **AV** or **projection** as part of the performance?If “Yes” please identify the format:Slide or Video/Data: |  |
| Will you be bringing **additional lighting equipment** to use in conjunction with the venue’s equipment?If “Yes” please list the type and quantity of additional equipment:Has the additional lighting equipment been tested and tagged in accordance with AS/NZS 3760?  |  |

Please complete this section only if you will be **touring your lighting equipment**:

|  |  |
| --- | --- |
| Please provide the name of the lighting equipment supplier: |  |
| **Power:**What are your power supply requirements? (Number of feeds & number of amps per phase)Has the touring lighting equipment been tested and tagged in accordance with AS/NZS 3760?  |  |

#### 8. SOUND

|  |  |
| --- | --- |
| Is the theatre’s “house PA” to be used? | *Yes or No* |

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| **Radio Mics:** |  |
| Do you require any of the microphones to be radio mics?(Hire & battery charges apply) | *Yes or No* |
| If “Yes” please note number & identify if they are to be hand held or lapel units?If you are using your own radios please list frequencies.  |  |
|  |  |
| **Play Back:** |  |
| Is there any pre-recorded sound in your performance? | *Yes or No* |
| If “Yes” what format? (CD, Minidisk, Cassette) |  |
| Number of playback units required? |  |
|  |  |
| **Sound Stage Plan:**Please attach a hard copy drawing of your performance showing position of each performer, musician, vocalists, fold back speakers, amplifiers, and DI’s. |
| **Running Order:**Please ensure a detailed running order is returned with this form.  |

#### 9. COMMUNICATIONS

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| --- | --- |
| Talkback |  |
| Will you be using the theatre’s talkback units? | *Yes or No* |
| If “Yes” please note the required location of each headset unit:If you are using your own Radio Talkback please list frequencies and attach a copy of your licence. |  |
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#### 10. SPECIAL EFFECTS

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| --- | --- |
| **Firearms** |  |
| Will you be using any firearms (ie: deactivated or blank firing, weaponry, starting pistols etc)? | *Yes or No* |
| If “Yes” give details of all the effects you wish to use. |  |
| If you are using firearms, please provide a copy of your Armour’s licence for the person who will be in control of the firearms whilst in the venue. |  |

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| **Lasers** |  |
| Will you be using any lasers? | *Yes or No* |
| If “Yes” please:* Advise which class laser you intend using. To determine the laser class, reference should be made to AS/NZS 2211– Laser safety
* give details of the effects you wish to use and identify the person responsible for setting up and operating the equipment:
 |  |
| **Other Effects** |  |
| Are there any other special effects, including the use of live animals, pyrotechnics, candles or flame that you will be using? | *Yes or No* |
| If “Yes” give details of all the effects you wish to use. |  |
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#### 11. ADDITIONAL INFORMATION

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| Are there any other details that involve technical aspects of your performance? (No information is too trivial)? |
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**Matthew Flinders Theatre – Conditions of Hire**

**Hire Period**

The hire period is contracted to commence from the time the Theatre is opened. Additional time may be charged at a rate stated in the Standard hire charges schedule.

**Cleaning Charges**

Standard Cleaning:

For all after-hours and weekend bookings there will be an extra cleaning charge of $94.00 plus GST.

Extra Cleaning:

Excessive litter or stage debris left by hirers will incur a clean up charge. Any spillage or litter left in the foyer will also incur a cleaning charge.

**Bookings**

We do not reserve bookings automatically from one year to the next. All bookings are therefore taken on a “first come, first served” basis.

**Bump In/Out**

If a technician is required to assist to bump in or out (including loading and unloading of scenery and equipment) a minimum four hour call charge will apply. All scenery and properties are to be removed from the theatre at the conclusion of the final performance unless prior arrangements have been made. (Note. Additional costs will apply if the bump out is not completed at the conclusion of the final performance).

**Refreshments**

Refreshments only are permitted to be served in the foyer. Other foods,eg. Hot snacks, sandwiches and cakes are not permitted unless prior arrangements have been made with management. A Liquor Licence is required if alcohol is to be sold and a copy of that licence must be returned with this document. Note also that access to power is limited in the foyer area. Food and drink are **absolutely prohibited** in the auditorium and stage area.

**Use of own equipment**

The hirer cannot use their own equipment or appliances (eg. Heaters, circular saws etc) without the prior approval of the Theatre Duty Technician. All electrical equipment must be tested and tagged in accordance with Australian Standard AS/3760. Users will follow all reasonable directions from University staff.

**Technical Facilities**

Theatre equipment is not to be operated without the approval and supervision of the Theatre Duty Technician.

**Fire Safety**

All aisles in the auditorium are Fire Exits and must be kept completely clear at all times.

**Parking**

It is the responsibility of the hirer to advise their patrons and staff of parking provisions at the Theatre. Charges apply at all car parks between the hours of Monday to Friday 9.00am to 5.00pm. Any person parking in reserved or restricted areas will be liable to incur a fine. The theatre is unable to reserve car parks or supply parking permits for hirers. A map of the campus showing parking areas can be viewed at http://mtu.flinders.edu.au/map/index.cfm

**Disabled Access**

Please note that disabled access to the Matthew Flinders Theatre is very limited.

**Deposit**

A deposit of $200:00 is payable upon signing of hire contract and is necessary to confirm booking. Deposit is refundable in full if a cancellation is made no less than thirty days prior to commencement of booking. Any technical or other expenses incurred will be deducted from the deposit.

**I hereby agree to abide by the conditions of hire above.**

**Signed……………………………………………………….. Date…………………………………….**

|  |  |
| --- | --- |
| **Form Completed by:** |  |
| **Name:** |  |
| **Position:** |  |
| **Date:** |  |
| **Signature:** |  |