

Venue Hire and Production Support Application

Form Preview

Eligibility

* indicates a required field

Please note:

Before completing this application form, you should have read the [Venue Hire and Production Support guidelines](#).

If you have any questions in regards to eligibility criteria, please email artistic@union.unimelb.edu.au

Before lodging your application, contact the Union House Theatre's Artistic Director to discuss the submission.

Applications are accepted at any time throughout the year, however, the Theatre Board should receive an application at least four weeks prior to the project commencement date.

Maximum funding: \$2,000.

Applicants must be Student Theatre Groups [currently affiliated](#) with Union House Theatre.

Confirmation of Eligibility

I confirm that:

- I have read and understand the program guidelines.
- This work does not form part of a University assessment.

Please select below: *

☐ Yes

☐ No

You must confirm that all statements above are true and correct.

Contact Details

* indicates a required field

Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*.

Applicant Organisation Details

Applicant name *

Organisation Name

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Please use your Student Theatre Group's name.

Primary contact person *

First Name

Last Name

The person we will correspond with about this application.

Position held in organisation

e.g. Producer, Director, Treasurer.

Primary contact's number *

Primary contact's email address *

This is the address we will use to correspond with you about this application.

Project Details

Title of Show

Author:

Director:

Venue

Application Amount?

Maximum funding is \$2,000.

Season start date

If unknown, provide your best guess.

Season end date

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If unknown, provide your best guess.

Performance Times

Number of Performances

Has the group obtained the rights to this production?

If applicable, please attach evidence that the group has the rights to this production

Attach a file:

Will auditions be held?

What are the objectives of this project?

Project Description or Synopsis:

Previous Projects

In what year was the student group formed?

List Previous Projects:

If applicable, name of production, year, venue.

Personnel

How many people are in the cast?

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How many University of Melbourne personnel are involved?

How many non-University of Melbourne personnel are involved?

Who are the principal members of the production team and what is their previous experience?

You might like to include short Curriculum Vitae or evidence of performing arts creative work to date.

Attach a file:

Attach a file:

Option for including a second curriculum vitae.

Accessibility

How have you considered Accessibility? That is, how can your project be experience/accessed by people with disabilities and/or from culturally and linguistically diverse backgrounds and/or with a low socioeconomic status?

Environmental Impact and Sustainability

What steps are you taking to ensure your work will leave a minimal environmental impact? How are you considering environmental sustainability?

Budget and Financial Details

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Who is your Treasurer?

Address

Address

Phone Number

Email

What is the current bank account balance of your student theatre group?

Download Forms & Templates

1. [Budget Template](#)

Affiliated student groups must complete the following forms:

2. [FO4a New Supplier Form \(Example of Completed FO4a Form\)](#)

3. [Statement by Supplier Form including Example of Completed Form](#) (only required if you don't have an ABN)

Please attach the completed Project Budget using the Budget Template

Attach a file:

If you are an affiliated student group, please attach the completed FO4a New Local Supplier Request Form

Attach a file:

If you are an affiliated student group and do not have an ABN, please attach the completed Statement by a Supplier form

Attach a file:

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Additional Information

Is there anything else you would like the Theatre Board to know which is relevant to your project?

Additional relevant information can be uploaded below:

Upload files

Attach a file:

or

Provide web link:

Must be a URL

Certification and Feedback

* indicates a required field

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant (may be different to the contact person listed earlier in this application form).

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant or applicant group is approved for this grant, I/we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes

☐ No

Name of contact *

First Name

Last Name

Position *

Position held within the student group (e.g. Director, Treasurer)

Contact's number *

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Contact's Email *

Date *

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

- ☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60 minutes

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.