



## THEATRE EVENT ENQUIRY FORM

Kindly fill out the information below so that we are able to submit our quotation to you based on your specific needs.

### CONTACT INFORMATION

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

DAY/WORK PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ FAX NO: \_\_\_\_\_

### ABOUT YOUR EVENT:

DD/MM/YY

DD/MM/YY

PREFERRED DATE(S): \_\_\_\_\_ ALTERNATIVE DATE(S): \_\_\_\_\_

START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

TOTAL ATTENDEES: \_\_\_\_\_

LOCATION:  POS  CHAG  TGO

### TYPE OF EVENT:

- Conference  Movie  Cocktail Reception  
 Product Launch  Graduation  Award Ceremony  
 Company Meeting  Other \_\_\_\_\_

### AUDIO/VISUAL REQUIREMENTS:

- Microphones  Lapel ( )  Cordless ( )  Standing ( )  
 P.A. System  DVD Player  CD Player  Multi-Media Projector ( )  
 Podium

**CATERING REQUIREMENTS:**

- Breakfast     Morning Snack Break     Lunch     Afternoon Snack Break  
 All day Beverage Station     Cocktails

**BAR REQUIREMENTS:**

- Non-Alcoholic     Standard     Premium     Ultra Premium  
 Not Applicable

**OTHER AMENITIES:**

- Head Table     Media Table     Reception Table

**RECEPTION / CATERING SPACE NEEDED:**     Yes     No

**CINEMA SEATING CAPACITY**

*Please select preferred cinema/s.*

**PORT OF SPAIN**

- Cinema 1 - 420
- Cinema 2 - 300
- Cinema 3 - 250
- Cinema 4 - 250
- Cinema 5 - 190
- Cinema 6 - 190
- Cinema 7 - 170
- Cinema 8 - 170
- Cinema 9 - 130
- Cinema 10 - 130

**CHAGUANAS**

- Cinema 1 - 300
- Cinema 2 - 300
- Cinema 3 - 160
- Cinema 4 - 160
- Cinema 5 - 270
- Cinema 6 - 160
- Cinema 7 - 160
- Cinema 8 - 160

**TOBAGO**

- Cinema 1 - 190
- Cinema 2 - 240
- Cinema 3 - 190
- Cinema 4 - 190

***Any other significant details you would like to inform us about your event:***