

# Cultural Resource Directory – Facility Listing Form

To be included in our Directory or to provide updated information, please complete and fax to 305/ 375-3068.

**Note:** This form is intended for the use of facilities that are located in Miami-Dade County.

## FACILITY INFORMATION

Name of Facility: \_\_\_\_\_  
 Managing Organization: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address (if different): \_\_\_\_\_  
 \_\_\_\_\_  
 Web Address: \_\_\_\_\_  
 General E-mail: \_\_\_\_\_

Phone (main): \_\_\_\_\_ ext. \_\_\_\_\_ Phone (information): \_\_\_\_\_ ext. \_\_\_\_\_  
 Fax: \_\_\_\_\_ TTY/TDD: \_\_\_\_\_

Facility Director/ CEO: \_\_\_\_\_ Events Manager: \_\_\_\_\_  
 Title: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_

## FACILITY SPECIFICATIONS

Number of Seats: \_\_\_\_\_  ADA accessible  
 Orchestra Pit:  Yes  No  ADA accessible

Number of Dressing Room(s): \_\_\_\_\_  
 Shower Facilities:  Yes  No  ADA accessible

Practice Room(s):  Yes  No (Please specify how many and capacity.) \_\_\_\_\_  
 Meeting Room(s):  Yes  No (Please specify how many and capacity.) \_\_\_\_\_

Stage:  Proscenium  Black Box  Thrust  Portable/Flexible  Marley Floor  
 Width \_\_\_\_\_  
 Depth \_\_\_\_\_  
 Height \_\_\_\_\_

Front of House Personnel: How many? \_\_\_\_\_  Union  Non-Union  Other (please specify): \_\_\_\_\_  
 Box Office Personnel: How many? \_\_\_\_\_  Union  Non-Union  Other (please specify): \_\_\_\_\_  
 Backstage Personnel: How many? \_\_\_\_\_  Union  Non-Union  Other (please specify): \_\_\_\_\_

Equipment Available:  
 Assisted Listening Devices  
 Stage Lighting Type: \_\_\_\_\_  
 Sound & Communication System Type: \_\_\_\_\_  
 Video Projection System Type: \_\_\_\_\_

*Please complete Facility Description on reverse.*

