VIRGINIA
MUSEUM
OF
CONTEMPORARY
ART

Virginia MOCA Community Rental Application

Please provide us with the following information to assist in processing your application:

Organization Name: _____

Organization address: _____

Phone number: _____

Contact Person and title: _____

Email: _____

Number of expected attendees: _____

Desired date and time (include at least 2 alternate dates): _____

_____

Desired Virginia MOCA space(s): ____ Atrium ____ Rodriguez Pavilion ____ Auditorium

Detailed description of event: _____

_____

_____

_____

_____

I have read and agree to all program parameters: _____

(signature)