



West Village Theatre

West Village Theatre Society
2007 10 Ave SW
Calgary, Alberta
T3C 0K4
403-242-7118

Partnership Application

Please fill out the below sections and attach your company's operating budget. Send your completed application to info@westvillagetheatre.com. We can't wait to meet you!

Name of your Company or Organization:	
Contact Information for Your Company:	
Phone Number:	Name of Contact:
Email Address:	
Your Business Mandate or Mission:	
Why Would your Company Make a Good Partner at West Village Theatre?:	
What is your Company's General Schedule? (When would you need time in the theatre?)	
Please Attach your Company's Operating Budget (circle attached below)	
Attached	