



## Rental Request Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Attention: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of event: \_\_\_\_\_ Time: \_\_\_\_\_

Type of event (reception, seated dinner, etc.): \_\_\_\_\_

Approximate number of guests: \_\_\_\_\_

Organization or corporate event: \_\_\_\_\_ Yes \_\_\_\_\_ No

Private social event (including Jewish life cycle events): \*\*\*\* Yes \*\*\*\* No

If yes, please describe: \_\_\_\_\_

Museum space requested:

\*\*\*\*\* Scheuer Auditorium

Offit Gallery

\_\_\_\_\_ Café Weissman

\_\_\_\_\_ Skirball Lobby

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please return form to:

Sharice Joseph

The Jewish Museum

1109 Fifth Avenue

New York, NY 10128

Ph: 212.423.3216

Fax: 212.423.3313

E-mail: [rentals@thejm.org](mailto:rentals@thejm.org)