

**Questions? Please contact:**

Eve Foldan  
 Ticketing Manager  
[evef@artsboston.org](mailto:evef@artsboston.org)  
 Updated: 5/5/2022

Before submitting this contract to sell tickets through BosTix, you must first add the event to the ArtsBoston Calendar website at [ArtsBoston.org/Calendar](https://ArtsBoston.org/Calendar).

**Event Information**

Organization	
Event Title	
Event Venue or Location <i>Please include street address</i>	
Event Run Dates	
Event Approx. Run Time Please indicate if there is intermission(s)	
Covid Policies (please link to any Covid vaccine/mask mandates or refund policy)	
Event Image (please provide min. of 400x400 image; aspect ratio 15:9)	

All performances will be taken off sale at **10am or four hours prior** to each performance and a will-call list will be sent shortly thereafter via email to the below individuals. Please let us know if this schedule/process does not work for your organization.

**Contact Information**

Primary Contact Name	
Primary Contact Email	
Primary Contact Phone	
Additional Box Office Names and Emails <i>If you are working with a venue's box office, please list ticketing contacts for both your organization and venue</i>	

**Ticket Allotments**

List each individual performances and price levels (if multiple) separately. Please note ArtsBoston deducts a \$1 commission from each ticket sold.

Day of Week	Date	Time	Seating Section	Amount of Allocated Tickets	Advertised Price	BosTix Price	Reimbursement (BosTix Pride - \$1 Commission)
Thursday (SAMPLE)	Nov 12, 2021	8:00 PM	Mezz	20	\$70	\$35	\$34

**Seating Information**

Type of Seating: Reserved or General Admission	
*Seating Section Descriptions Please elaborate on seating section name above, if necessary	

**Age Recommendation**













Is there is a required minimum age? Please indicate.

If not, what is the recommended minimum age?

If not provided, event may be promoted as appropriate for all ages.

**Accessibility**

To the best of your knowledge, please indicate which (if any) accessibility features your event offers. If you would like to explain further, please use space below.

- |                          |   |                                  |                          |   |                          |                          |   |                                 |                          |   |                          |
|--------------------------|---|----------------------------------|--------------------------|---|--------------------------|--------------------------|---|---------------------------------|--------------------------|---|--------------------------|
| <input type="checkbox"/> |  | <b>Assisted Listening System</b> | <input type="checkbox"/> |  | <b>Audio Description</b> | <input type="checkbox"/> |  | <b>Braille</b>                  | <input type="checkbox"/> |  | <b>Closed Caption</b>    |
| <input type="checkbox"/> |  | <b>Info</b>                      | <input type="checkbox"/> |  | <b>Large Print</b>       | <input type="checkbox"/> |  | <b>Low Vision</b>               | <input type="checkbox"/> |  | <b>Open Caption</b>      |
| <input type="checkbox"/> |  | <b>Sign Language</b>             | <input type="checkbox"/> |  | <b>TDD/TTY</b>           | <input type="checkbox"/> |  | <b>Volume Control Telephone</b> | <input type="checkbox"/> |  | <b>Wheelchair Access</b> |

Please elaborate below, if necessary:

**Payment**

If your reimbursement check needs to be made out to a party other than the organization listed above, please indicate the name and address where it should be sent:

Is there anything else you would like us to know?

**BosTix Terms and Conditions**

*Ticket Allotments*

The Producer agrees to reserve the specified number of tickets at the indicated face values for all performances listed. If ArtsBoston sells out of the number of tickets reserved, the maximum may be increased with the Producer's permission. Producer reserves the right to add or reduce the allotment at the Producer's discretion.

*Sales Schedule*

Individual performances will remain on sale for as long as inventory is available, including through day-of-show. ArtsBoston and the Producer will arrange for specific sales end time as the performances approach.

*Order Fulfillment*

ArtsBoston will send a will call list listing all ticket buyers for each performance. The will call list will be sent via e-mail to the Producer and any additional box office contacts at the arranged sales end time or at the Producer's request. ArtsBoston allows patrons to purchase up to 8 tickets per performance per order and guarantees patrons that orders will be seated together. If a Producer anticipates inability to seat an order together, they must inform ArtsBoston.

*Reimbursements*

Reimbursements are submitted for processing the Wednesday after the final performance of the run. For events with open-ended runs, reimbursements are submitted for processing at the end of each month for the performances in that month. Payment per ticket is half of the face value minus a \$1 ArtsBoston commission. If your organization owes ArtsBoston money for any reason, if your Membership status with ArtsBoston is not settled, or if ArtsBoston does not have a signed copy of the ticketing contract, ArtsBoston may withhold reimbursement until all these matters are settled.

*Changed or Cancelled Performances*

The Producer must inform ArtsBoston of any changes or cancellations to performances currently on sale through BosTix. ArtsBoston will contact affected patrons to inform them of changes and, if necessary, work with the Producer to offer them to attend alternative performances. Unless the Producer indicates otherwise, these exchanged patrons will be in addition to the number of tickets already reserved for ArtsBoston for that performance.

***By submitting this form, I acknowledge that I have read and agree to the BosTix Terms and Conditions.***

**Name** \_\_\_\_\_

**Initials** \_\_\_\_\_

**Please email completed contract to Brent McCreary at [brentm@artsboston.org](mailto:brentm@artsboston.org).**