

EVENT INQUIRY FORM

Inquiry Date: _____

Contact Name: _____

Phone: _____ **Email:** _____

Event Information

Name of Event: _____

Promoter/Host: _____

Company Name: _____

Type of Event:

- | | | |
|--|--|--|
| <input type="checkbox"/> Tradeshaw | <input type="checkbox"/> Corporate | <input type="checkbox"/> Conference |
| <input type="checkbox"/> Festival | <input type="checkbox"/> Sports Event | <input type="checkbox"/> Concert/Dance |
| <input type="checkbox"/> Private Event | <input type="checkbox"/> Wedding/Reception | <input type="checkbox"/> Quinceanera (o) |

Other: _____

Dates Requested: 1st Choice _____ 2nd Choice: _____

Guest Count (est.): _____

Facility Requirements: indoor or outdoor: _____ approximate square footage: _____

Facility Name: 1st Choice _____ 2nd Choice: _____

Additional Event Information:

Follow Up Action Requested:

- Please send event information to (email address): _____
- Please call (name): _____ Phone: _____
- Please schedule a tour/meeting and I am available: _____ (1st choice) _____ (2nd choice)
- Please place a 7 day tentative hold on (date) _____ for (facility location) _____
- Please send estimate and contract