

Plaza Booking Form

Events less than 250 people

Contact 1:					
Name:					
Phone #:			Cell #:		
Street Address:					
City:			Postal Code:		
Email:					
Contact 2:					
Name:					
Phone #:			Cell #:		
Street Address:					
City:			Postal Code:		
Email:					
Event Name:					
Date:			Time:		
Is This a Repeat Event? ☐Yes	□No				
Crowd Size:			Spectators:		
Set Up Time:			Take Down Time:		
Volunteer/Personnel:					
Fountain? □On	□Off		Lights:	□On	□Off
Bathrooms: □Open	□Closed				
Have You Booked Rooms in City Hall?	□Yes	□No			
Signed the Hold Harmless Agreement?	□Yes	□No			
Submitted Insurance Forms?	□Yes	□No			
Additional Details:					
Food:	□Yes	□No	Alcohol:	□Yes	□No
Commercial Sales?	□Yes	□No	Games of Chance:	□Yes	□No
On Time Admission:	□Yes	□No	Stage/Scaffolding:	□Yes	□No
Sound System:	□Yes	□No	Tents:	□Yes	□No
Porto Potty Rentals:	□Yes	□No	,		
Power on Site:	□Yes	□No	Generators:	□Yes	□No

