

Veterans Park Amphitheatre Rental Application



EVENT DATE: _____

Contact Name: _____ Position: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact email: _____

Contact Phone: _____ Fax: _____

EVENT SUMMARY

Please give a brief description of the event including guest speakers, performers, etc., the target audience and the purpose of the event. Also mention any setup details such as tables and chairs.

Anticipated number in attendance? _____

Will alcoholic beverages be served? If so it must be served by a licensed caterer.

Yes or No

Will the event be catered? Yes or No

Name of catering company? _____

Open to the public? Yes or No

Will an admission fee be charged? Yes or No

EVENT SCHEDULE

Please be specific. List the following information, if applicable:

Arrival/set-up time for event coordinator(s) _____

Arrival time for caterers and/or sound technicians _____

Performer check-in, sound check _____

Audience arrival _____

Time for clean-up _____

****Attach an additional sheet if necessary****

Please note that you are entirely responsible for set-up and clean-up. The clean-up deposit will be returned if area is clean appropriately after the event. Please write out a separate check for the clean-up deposit.

SECURITY PLAN

Please be specific, give a brief description of your security plan or will you utilize the services of the Albany Police Department.

****Attach an additional sheet if necessary****

Please send completed information to:

Monique Broughton

Assistant to the Downtown Mgr.

222 Pine Avenue, Ste. 560 ~ Albany, GA 31702

229-483-7665 Direct Line ~ 229-431-3223 Fax ~ mbroughton@albany.ga.us

(To Be Completed By Downtown Manager Staff)

Facility Rental:	\$150.00	/
Clean-up Deposit:	\$100.00	/
Date Fee Paid		/
Receipt #		/