

VENUE INQUIRY FORM

This Inquiry Form falls under the authority of the Special Events Committee (SEC) of The Kelly Fitzpatrick Center for the Arts. Any deviations from this form should be approved by the SEC before the Rental Agreement is executed.

CONTACT INFORMATION

Na	me/Organization:					
Ad	dress:					
Tel	ephone Number:					
Em	ail:					
Eν	ENT INFORMATION					
1.	Proposed Event Date(s):					
2.	Start & End Time(s):					
3.	Estimated Number of Attendees:					
4.	Type of Event (Be specific):					
5.	Is this a fundraising event?		Yes		No	
	If yes, please indicate the purpose of the	fund	draiser:			
6.	Is this a ticketed event?		Yes		No	
	If yes, how much is each ticket?					
7.	Will alcohol be served at this event?		Yes		No	
	If yes, please indicate what types:		Wine		Beer	Hard liquor
8.	Will alcohol be complimentary?		Yes		No	Does not apply
	If yes, will drink tickets be given?		Yes		No	Does not apply
	If yes, how many tickets per person?					
9.	Will alcohol be sold at this event?		Yes		No	Does not apply
10	. Will food be served at this event?		Yes		No	
	If yes, who will prepare the food?		Self		Caterer:	
11	. Will there be live music or DJ?		Yes		No	
	If yes, please indicate: Type of Music:			Nar	me(s):	
	☐ Band		DJ		Other:	