

APPLICATION "City Center" Lot (Former Washington Convention Center Site)

CLIENT INFORMATION

Applicant Name:		Organization Name:		
Address:		City:	State:	Zip:
Email Address:		Web Site Address:		
Phone: ()	Fax: ()	Mobile: ()	Pager: ()	
Federal EIN/Personal SSN				

EVENT INFORMATION

Event Name:		Event Description:		
Show Production Company (if applicable):	Est. Attendance Per:	Ticketed Event: Yes <input type="checkbox"/> No <input type="checkbox"/>	Open to the Public Event: Yes <input type="checkbox"/> No <input type="checkbox"/>	Seating Style:
Ticketing Agent:	(Day) <input type="checkbox"/> # (Event) <input type="checkbox"/> #	Cost Per Ticket Adult: \$ Cost Per Ticket Senior: \$ Cost Per Ticket Child: \$		
Name of Event Organizer/ Planner:		Event Line Phone Number: ()	Event Website:	
Designated On-Site Event Coordinator:		Coordinator Mobile:	Coordinator Email Address:	
Designated Name on Contract:		Title:		
Sponsor(s):		Beneficiary:		
Name of Last Event Held:		Location of Last Event Held:		

Do you plan to serve food and/or non-alcoholic beverages at your event? If yes, please explain the types of food and/or beverages that will be served.

Do you plan to serve alcoholic beverages at your event? If yes, please explain the types and how you plan to control the distribution of alcoholic beverages.

Do you plan to sell retail merchandise at your event? If yes, please provide a vendor list and the items to be sold.

Describe the event's transportation plan. A) To move patrons both on and off the site; B) To move patrons into and out of downtown.

REQUESTED LOCATIONS AND PROPOSED SCHEDULE

"A" Section

_____	_____	Move In Date(s)	_____	to	_____
Event Date(s)	_____ to _____	Move In Times	_____	to	_____
Event Times	_____ to _____	Move Out Date(s)	_____	to	_____
		Move Out Times	_____	to	_____

"B" Section

_____	_____	Move In Date(s)	_____	to	_____
Event Date(s)	_____ to _____	Move In Times	_____	to	_____
Event Times	_____ to _____	Move Out Date(s)	_____	to	_____
		Move Out Times	_____	to	_____

"C" Section

_____	_____	Move In Date(s)	_____	to	_____
Event Date(s)	_____ to _____	Move In Times	_____	to	_____
Event Times	_____ to _____	Move Out Date(s)	_____	to	_____
		Move Out Times	_____	to	_____

PLEASE LIST ANY ADDITIONAL INFORMATION TO ASSIST US IN EVALUATING THIS APPLICATION

SPECIAL CONDITIONS (i.e. no flash photography, VIPs, media only, use of animals)

Please answer YES or NO to the following questions.

(Please attach documentation as needed for additional information)

Have you promoted this type of event, or one similar, before? If Yes, please list the name, date, and location of the event(s).

If you have previously promoted this event elsewhere, were you required to submit site, fire, and security plans to the licensor for approval? If Yes, please attach any approved samples you may have. _____

Do you have samples of literature which have been or may be used to promote/advertise your event? If YES, please attach them to the application. _____

Have you ever promoted an event in Washington, DC? If Yes, please list the name, date and location of the events. _____

If you have previously promoted an event in Washington, DC, do you have any financial and/or tax related issues that have settlement pending? If Yes, list the name, date, and location of the events that are pending settlement. _____

Returning this application form indicates the applicant has applied to produce a special event on the Old Convention Center Site in Washington, DC and has reviewed understands all applicable usage guidelines, rules, regulations, policies, procedures, ordinances and laws.

Print Name & Title

Signature

Date

Return this completed application to:

Claire Carlin
Downtown Events Corporation
1250 H Street, NW
Suite 1000
Washington, DC 20005

Fax: 202-661-7599

Email: Claire@downtowndc.org