

Les Schwab Amphitheater

SPECIAL EVENT APPLICATION

Name of Organization _____

Status (Non-Profit; LLC; etc) _____ Contact Person _____

Business Address _____

City _____ Federal I.D. # / Social Security # (circle one): _____

State/Zip _____

Phone # _____

FAX # _____ Email _____

Please indicate the type activity, event, or purpose you wish to have at the Amphitheater _____

Requested use date(s) _____

How many people (employees and guests) will you have on site? _____

Do you plan to serve, or allow Alcoholic Beverages, at your event? _____ Yes _____ No

Please Note: Alcoholic Beverages are prohibited, without prior permission of Amphitheater Management. If permission is granted, a copy of the State Liquor License must be provided prior to the event.

Please note additional services requested for your event:

White House _____ Rail Cars (indicate quantity) _____ Ticket Sales Office _____

Name or Insurance Carrier and Agent _____

Insurance Agent's phone number _____

Policy Number _____ Expiration Date _____

A certificate of Liability Insurance must be provided prior to the event, with the following verbiage, naming as additional insured: **“ Deschutes River Amphitheater, LLC; River Bend Limited Partnership, River Shops, LLC; and/or any subsidiary, proprietary company or corporation, partnership, limited partnership, limited liability company, or joint venture thereof, whether existing, past, present, or future, and any of their successors or assignees, are named as Additional Insured.”**

The amount of liability coverage will be determined prior to the event, but shall be a minimum of \$1,000,000 per occurrence.

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How many vehicles do you expect to park, and where? _____

Do you anticipate the need for security, prior to, during, or after your event? _____ Yes _____ No

Do you have plans to advertise your event prior to or while at the Amphitheater? _____ Yes _____ No

Please note: The use of posters, attached to City signs, power poles, distributed on cars, etc is prohibited. Any event advertised in this manner, will be immediately cancelled, and the event's security deposit applied to clean up efforts.

Other information you feel would be helpful in processing your application _____

Applicant Signature

Received by

Date

Date

Title

Title

This application is for informational purposes only and is not to be construed in any way as a commitment to enter into an agreement with applicant.