



Event & Facility Use Application

Please answer all questions, do not leave any blanks. If a question does not apply to your event, write N/A. Failure to complete this form properly may result in a delay in scheduling your event.

Company (Licensee) Name: _____

Event Name: _____

Description of Event: _____

Event Date(s): _____

Estimated # of Attendees: _____ (NOTE: Number must not exceed Fire Marshall Limitations)

Location of Event: Terminal 2 Terminal 3 Terminal 6 Board Room
 Atrium Patio Other _____

Contact Information

Main Contact

Company Name: _____

Contact: _____

Office Phone: _____

Cell Phone: _____

Fax No.: _____

Email: _____

Alternate Contact: _____

Billing Contact

Company Name: _____

Contact: _____

Office Phone: _____

Cell Phone: _____

Fax No.: _____

Email: _____

Insurance Agency Contact

Company Name: _____

Contact: _____

Office Phone: _____

Cell Phone: _____

Fax No.: _____

Email: _____

Port Tampa Bay Contact

Contact Name: _____

Department: _____

Extension: _____

Email: _____

Event Information

Will Your Event Include (please check all that apply):

PLEASE NOTE THAT LICENSEE WILL BE REQUIRED TO MAKE ARRANGEMENTS FOR ALL OF THE SERVICES CHECKED BELOW AND IS RESPONSIBLE FOR PAYING FOR THOSE SERVICES.

- | | | |
|---|--|--|
| <input type="checkbox"/> Food & Beverage | <input type="checkbox"/> Audio Visual | <input type="checkbox"/> Decorator |
| <input type="checkbox"/> Band or DJ | <input type="checkbox"/> Dance Floor | <input type="checkbox"/> Stage/Risers |
| <input type="checkbox"/> Rigging/Banners/High Reach | <input type="checkbox"/> Fans/Misters | <input type="checkbox"/> Valet parking |
| <input type="checkbox"/> Tents | <input type="checkbox"/> Tables & Chairs | |
| <input type="checkbox"/> Dumpsters | <input type="checkbox"/> Port-o-Lets | |
| <input type="checkbox"/> Alcohol (NOTE: City of Tampa permit must be obtained. If alcohol is provided by caterer, caterer must have valid liquor license.) | | |
| <input type="checkbox"/> Security (NOTE: Events with alcohol are required to have security provided by Licensee. Tampa Police Department (TPD) will be the sole provider of security services for events held at Port Tampa Bay facilities. | | |
| <input type="checkbox"/> Special Effects (please describe): _____ | | |
| <input type="checkbox"/> Other (Please describe): _____ | | |

- For Board Room Set up Only: Theater Style (maximum allowable attendees = 90)
 Classroom Style (maximum allowable attendees = 35)

****Please Note: Food and drink will only be allowed in the Board Room on a case-by-case determination. If allowed, the Licensee shall be responsible for removing ALL trash and leftover food IMMEDIATELY after the Event. Failure to remove trash and leftover food will result in the forfeiture of the security deposit.**

Please list any details that Port Tampa would need to know or supply, i.e. special power requirements, etc.

Vendor & Exhibitor Information

Caterer

Company: _____

Contact: _____

Phone (Office): _____

(Cell): _____

Email: _____

Decorator

Company: _____

Contact: _____

Phone (Office): _____

(Cell): _____

Email: _____

Exhibitors (please list all exhibitors, if any):

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Company: _____

Production Company

Company: _____

Contact: _____

Phone (Office): _____

(Cell): _____

Email: _____

Audio Visual Company

Company: _____

Contact: _____

Phone (Office): _____

(Cell): _____

Email: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Type of Exhibit: _____

Event Schedule

- The Event Schedule must be approved by Port Tampa Bay’s Operations Department if Event is to be held in a Cruise Terminal.
- The Event Schedule must be approved by Port Tampa Bay’s Real Estate Department if the Event is to be held in the Board Room, Atrium, or Patio.)

Decorator Move-In Audio Visual Move-In Caterer Move-In	Day	Date	Start Time	End Time
Exhibitor Move-In	Day	Date	Start Time	End Time
Registration	Day	Date	Start Time	End Time
Event	Day	Date	Start Time	End Time
Exhibitor Move-Out	Day	Date	Start Time	End Time
Decorator Move-Out Audio Visual Move-Out Caterer Move-Out	Day	Date	Start Time	End Time

Approved by Port Tampa Bay’s Operations Department/Real Estate Department:

Signature: _____

Printed Name: _____

Date: _____