

Name of organization: _____ FEIN: _____

Website address: _____ *If you do not have a website, attach brochure and detailed description of daily activities of organization.*

1. Total number of events: _____

2. Complete chart below for each event. **If additional space is required, provide information on an attachment.**

Provide the following information:	EVENT 1	EVENT 2	EVENT 3
Name of event:			
Date, time and location of event:			
Total estimated attendance:			
Gross sales from admissions:	\$	\$	\$
Gross sales from food or non-alcoholic beverages:	\$	\$	\$
Gross sales from alcohol:	\$	\$	\$
Other gross sales:	\$	\$	\$
Annual event?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Has any claim or incident ever arisen out of this event?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Emergency medical personnel present?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Security personnel present?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Golf carts or trams at event?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Activities at event (use all applicable activity codes from list below):			

Activity Codes (for use above)

- | | | |
|---------------------------|--|---|
| A. Golf outing | H. Aircraft (motorized or not) | O. Parade (only entry of float into a parade) |
| B. Wine tasting | I. Animals | P. Parade – participation in a parade (no floats) |
| C. Dinner, gala or picnic | J. Athletic participation | Q. Parade – sponsorship of a parade |
| D. Auction | K. Fireworks sales or show | R. Use of any motorized vehicle(s) |
| E. House tour | L. Haunted house or trail | S. Concert – describe type of music |
| F. Fashion or Art Show | M. Mechanical rides | T. Other – describe in space above |
| G. Bingo | N. Non-mechanical entertainment devices (e.g. bounce houses) | |

3. Do you sponsor or co-sponsor any parades? YES NO

If yes, a. Number of: floats _____ horses _____ participants _____

b. Do you require certificates of insurance, with \$1,000,000 liability limits from all participants? YES NO

4. a. Describe all mechanical or non-mechanical devices used at special events: _____

b. Are devices indicated provided and operated by a contractor? YES NO

If yes, do you obtain or require a certificate of insurance from the contractor? YES NO

5. If alcohol sales are indicated above, provide the following information:

a. Is any employee or volunteer of your organization responsible for serving alcohol? YES NO

b. What alcohol dispensing controls are in place? _____

c. Type of license you have for sale of alcohol: Permit for event only Annual liquor license Alcohol served by caterer

Completed by: _____ Date Completed: _____