

# Event Inquiry Form

## (Request For Proposal)

### Contact Information

Event Name: \_\_\_\_\_

Event Host Organization: \_\_\_\_\_

Event Type: \_\_\_\_\_

Expected Number of Attendees: \_\_\_\_\_ Event Date: \_\_\_\_\_

Key Contact Person: \_\_\_\_\_ Job Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Preferred Method of Communication:

\_\_\_\_ Telephone      \_\_\_\_ Email      \_\_\_\_ Fax

Event Organizer/Host Organization Billing Address:

Billing Contact Person: \_\_\_\_\_

Billing Address: \_\_\_\_\_

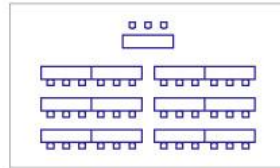
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

# Event Profile

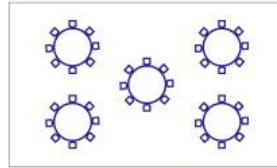
Start Time: \_\_\_\_\_

End Time: \_\_\_\_\_

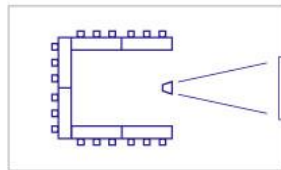
## Set-up Type Required:



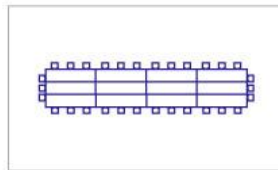
CLASSROOM STYLE



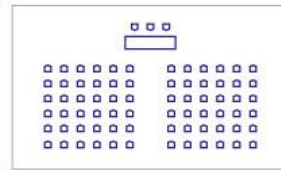
BANQUET STYLE



U-SHAPE STYLE



CONFERENCE STYLE



THEATRE STYLE

\_\_\_\_\_ Theatre    \_\_\_\_\_ Conference    \_\_\_\_\_ U-Shaped    \_\_\_\_\_ Classroom

Banquet:    \_\_\_\_\_ Rounds for 6    \_\_\_\_\_ Rounds for 8    \_\_\_\_\_ Rounds for 10

## A/V Requirements:

\_\_\_\_\_ Projector    \_\_\_\_\_ Screen    \_\_\_\_\_ Laptop    \_\_\_\_\_ Podium

Microphone(s):    \_\_\_\_\_ wireless handheld    \_\_\_\_\_ wireless lapel

\_\_\_\_\_ stand mic (floor)    \_\_\_\_\_ podium mic    \_\_\_\_\_ table top mic

## Other:

Overall Budget: \_\_\_\_\_ Includes Tax(?): \_\_\_\_\_ Yes \_\_\_\_\_ No

Includes Service Charges(?): \_\_\_\_\_ Yes \_\_\_\_\_ No

Includes Gratuity(?): \_\_\_\_\_ Yes \_\_\_\_\_ No

**Comments/Special Needs:**

---

---

---

---

---

---

---

---

**Proposal Presentation Dates:** \_\_\_\_\_ **Decision Date:** \_\_\_\_\_

**Site Inspection Date:** \_\_\_\_\_ **No. of Site Inspection Attendees:** \_\_\_\_\_