

Special Event Request

Name *

Greg Eberdt

Email *

greg@arseniorolympics.org

Phone *

501-321-1441

Organization *

Arkansas Senior Olympics

Select which type of organization best represents you. *

- Not-for-profit
- Government Agency
- For-profit

Billing Address: *

PO Box 55811, Little Rock, AR 72215-5811

Date of Event *

MM DD YYYY

10 / 18 / 2019

Space being requested *

- Full Gym
- Large Room Upstairs (A/V available)
- Large Room Downstairs (Kitchen Access available)
- Other:

Estimated Number of Attendees *

150

Estimated Number of Attendees From Out of Town *

140

Check All that Apply: *

- Cater Food/Beverage
- Sell Food/Beverage
- Provide OR Sell Alcohol
- No food or beverage will be present

Any other items not covered above:

snacks and water provided to athletes

Briefly explain why you believe this event should receive a partial or full waiver of rental fees: *

We are bring tourism to Bryant, just like we did in 2018. This is a 3 day event, being Oct 18-20, 2019. So people will be staying in some local hotels.

By checking the box below I understand that this is a request and agree to pay for this event upon approval. *

I agree

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