



Event Service Providers List and Term Sheet

Tenant's Name: _____

Daytime Telephone: _____ (Cell/Home/Office)

E-mail: _____

Day and Date of Event: _____

If event is a wedding: Bride/Groom _____

Bride/Groom _____

Number of Guests Attending: _____

Hours of the Event: _____ to _____

(Including set up, break down, removal of equipment, and clean up)

Additional Hour(s) Purchased: _____

(Must be pre-approved by Event Manager)

Guest Arrival Time: _____

Guest Departure Time (approximately 1 hour prior to event end time): _____

Catering Company and Their Staff Contact: _____

Telephone and email: _____

Arrival time (no earlier than event start time) : _____

Time ready for fire marshal inspection: _____

Departure Time (no later than event end time): _____

Caterer's ABC License: _____

Caterer's Rental Equipment Company & Their Staff Contact: _____

Telephone and email: _____

Delivery Time (no earlier than event start time): _____

Pickup Time (should coincide with guest departure time) _____

Departure Time (no later than event end time): _____

Florist and Their Staff Contact: _____

Telephone and email: _____

Delivery time (no earlier than event start time): _____

Photographer and Their Staff Contact: _____

Telephone and email: _____

Arrival time (no earlier than event start time): _____

Outdoor Musicians (*Acoustic only*) and Their Staff Contact: _____
Telephone and email: _____
Arrival time (no earlier than event start time): _____

Indoor Musicians/DJ/Entertainment and their Staff: _____
Telephone and email: _____
Arrival time (no earlier than event start time): _____

***Valet and Their Staff Contact:** _____
Telephone and email: _____
Arrival time (no earlier than event start time): _____

(* Applicable to events for 161-200 guests.)

Tenant Signature

Date

Name and Address to return security deposit (barring no damage.)

Name: _____

Address: _____

City, State, Zip: _____

