



## HOSTING AN EVENT AT LIBERTY PLACE

DATE: \_\_\_\_\_

FUNCTION: \_\_\_\_\_

TIME: From: \_\_\_\_\_ To: \_\_\_\_\_

# OF ATTENDEES: \_\_\_\_\_

Elevators to your floor should be unlocked starting at what time (if applicable)?

**Catering:**

Will alcohol be served?                      Yes\*\*                      No

Will food be served?                      Yes                      No

**If yes,**

A. Will the event be self-caterer?      Yes                      No

**Or**

B. Will a caterer be hired?              Yes\*\*                      No

Catering Company: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Contact Name: \_\_\_\_\_

What time will the Caterer arrive to setup (if applicable)?

Guests are expected to arrive at what time?

Is there a guest list?

Guests are expected to depart at what time?

Caterer will arrive at what time to remove equipment?

Elevators to your floor should be locked at what time (if applicable)?

**Point on Contact for the Event:**

Contact Name: \_\_\_\_\_ Cell: \_\_\_\_\_

**Additional Services:**

Are janitorial services required?

Yes

No

Time Needed: \_\_\_\_\_

Will security be required?

Yes

No

Time Needed: \_\_\_\_\_

Will overtime HVAC be required?

Yes

No

If yes, Time on: \_\_\_\_\_ Time off: \_\_\_\_\_

Special Requests?

\*\* Please attach the proper certificate of insurance with this form five (5) days prior to the Event.