

Organization Information

Organization Name*

Federal Tax ID Number/EIN *

= =

Contact Name*

Phone Number*

= =

Email*

Street Address*

City*

State*

Zip Code*

Website*

Mission/Vision of the Affiliated Organization*

Direct/Indirect Event Beneficiaries*

Does your organization have any religious/spiritual affiliation? If yes, please explain*

Event Information

Event Name*

Proposed Date of the Event*

Will Rehearsal be Required?* If yes, please Estimate the Time Needed

(Please Note: The Total span of the Reservation may not exceed 10 Hours)

Arrival, Load In and Set Up Time*

Event Start Time* (Include Pre-Reception, if Applicable)

Event End Time*

Program Start Time

Program End Time

Will Food or Beverages be Served?* Yes/No

Will Alcohol be Sold/Served?* Yes/No

Will There be Any Guests under the Age of 21?

Will Admission be Charged/Tickets Sold?* Yes/No

Estimated Number of Guests*

Purpose of the Event*

Description of Event*

Referral Information

How did you find out about the venue?

Qualcomm Employee Referral (if applicable)

Employee Name

Employee affiliation with organization requesting use of the venue