

ORGANIZATION INFORMATION

Today's Date: _____

Organization / Company Name: _____
Mailing Address: _____
Primary Contact Name & Title: _____
Mobile Phone Number: _____
Email Address: _____

EVENT OVERVIEW

Name of Event: _____
Event Date(s): _____
Event Start Time: _____ Event End Time: _____

Please select the event type (check one):

- | | |
|---|---|
| ☐ Team / Organization Practice | ☐ Tournament |
| ☐ Camp / Clinic / Combine | ☐ Corporate Event / Private Function |
| ☐ Other (please describe): _____ | |

Brief description of the event (purpose, format, etc.):

FACILITY USAGE REQUIREMENTS

Number of courts requested (3 courts available):

Will courts be used simultaneously? ☐ Yes ☐ No

Will turf area usage be required? ☐ Yes ☐ No

If yes, please describe intended turf usage (sport/activity, duration, age group):

Partial facility use or exclusive/private use of entire courts and common areas?

☐ Partial Use ☐ Exclusive Facility Buyout

Requested load-in time: _____

Requested load-out time: _____

Will your event require after-hours access? ☐ Yes ☐ No

PARTICIPANTS & ATTENDANCE

Estimated number of participants/players: _____

Age range of participants: _____

Estimated number of teams: _____

Estimated number of spectators: _____

Estimated total attendance (players + spectators): _____

REGISTRATION, ADMISSION & FUNDRAISING

Is this a fundraising event? ☐ Yes ☐ No

If yes, please explain:

Will participants be charged a registration fee? ☐ Yes ☐ No

If yes, amount: _____

Will spectators be charged an admission fee? ☐ Yes ☐ No

If yes, amount: _____

Accepted payment methods (check all that apply): ☐ Cash ☐ Credit/Debit ☐ Online / Digital Payments

STAFFING & GAME OPERATIONS

Will officials/referees be utilized? ☐ Yes ☐ No

Will you have your own scorekeepers or clock operators? ☐ Yes ☐ No

Will a certified athletic trainer be present for the entire event? ☐ Yes ☐ No

INSURANCE & RISK MANAGEMENT

Do you have a Certificate of Insurance (COI)? ☐ Yes ☐ No

If approved, a COI naming CORE4 Athletic Complex as additionally insured will be required prior to the event. A sample COI will be provided to ensure proper coverage.

VENDORS, MEDIA & ENTERTAINMENT

Will any vendors be present? ☐ Yes ☐ No

If yes, please list vendor names and services:

Will food or catering be provided or sold? ☐ Yes ☐ No

Will a DJ or amplified music be used? ☐ Yes ☐ No

If yes, please describe:

Will a photographer and/or videographer be present? ☐ Yes ☐ No

Will the event be livestreamed or broadcast? ☐ Yes ☐ No

If yes, please list platform(s):

SECURITY & SPECIAL CONSIDERATIONS

Do you anticipate the need for security personnel? ☐ Yes ☐ No

IMPORTANT SECURITY NOTICE:

All tournaments, events with spectators, and large-crowd events are **REQUIRED** to provide their own licensed off duty security personnel.

Any special requests, non-standard equipment, signage, staging, or setup needs?
(Chairs, tables, banners, stages, etc.)

IMPORTANT SETUP & EQUIPMENT NOTICE:

CORE4 Athletic Complex does **not** provide chairs, tables, pipe and drape, staging, or decorative equipment.

DAY-OF EVENT CONTACT

Primary on-site contact name:

Mobile phone number:

Email address:

Submission of this questionnaire does not guarantee availability or approval. All events are subject to review, pricing confirmation, staffing requirements, insurance verification, and execution of a formal rental agreement.