



# LOUISVILLE

REGIONAL AIRPORT AUTHORITY



## Special Event and Facility Use Application

### Organization Information

Organization Name \_\_\_\_\_

Point of Contact \_\_\_\_\_ Title \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

### Event Information

Event Name \_\_\_\_\_ # of Attendees \_\_\_\_\_

Event Date(s) \_\_\_\_\_ Event Times \_\_\_\_\_

Load In Date(s) \_\_\_\_\_ Load Out Date(s) \_\_\_\_\_

Audio System Required \_\_\_\_\_ Food/Beverage Provided or Served \_\_\_\_\_

Alcohol Provided or Served \_\_\_\_\_

Event Location(s) \_\_\_\_\_

Parking Location(s) \_\_\_\_\_

### Detailed Description of Event

### For LRAA Staff Only

Special Event Fee \_\_\_\_\_

Is the Special Event exclusively on LRAA tenant's leased space? \_\_\_\_\_

Has the Organization provided an operation and parking plan? \_\_\_\_\_

Has the Organization provided copies of applicable alcohol / tent permits? \_\_\_\_\_

Equipment and Personnel Required \_\_\_\_\_