



Roger Dean Chevrolet Stadium Rental Application

Please fill out this application in its entirety, printed or typewritten. If the application is not complete, it will be returned for more detailed information. Please attach additional sheet(s) if extra space is needed.

I, applicant, understand that final confirmation of date and facility rental is contingent upon receipt of the rental deposit and a fully executed agreement.

I have read and agree to the above statement. _____
Signature of Applicant

1. Event Name: _____

2. Purpose of Event: _____

3. Estimated Daily Attendance: _____

4. Requested Dates and Times of Event (not including set up and tear down)
 All events must be within the hours of 7:00 a.m. – 11:00 p.m. No exceptions.

5. Day	Date	Begin	End
_____	_____	_____ AM/PM	_____ AM/PM
_____	_____	_____ AM/PM	_____ AM/PM
_____	_____	_____ AM/PM	_____ AM/PM

6. Set up for event will begin on: _____ at _____
Date Time

7. Break down will be completed by: _____ at _____
Date Time

8. Will your event require road closings? Yes No

9. Has this event been held in the past? Yes No

If yes, please list past dates and location: _____

Part II: Event Information

10. What facilities are you planning on using (please check all that apply)?

Roger Dean Chevrolet Stadium

- | | |
|---|--|
| <input type="checkbox"/> Main Field | <input type="checkbox"/> Batting Cages |
| <input type="checkbox"/> Practice Fields – (# Fields _____) | <input type="checkbox"/> Concourse |
| <input type="checkbox"/> Miami Marlins Clubhouse | <input type="checkbox"/> Suites |
| <input type="checkbox"/> St. Louis Cardinals Clubhouse | <input type="checkbox"/> Party Deck |
| <input type="checkbox"/> Visitor Clubhouse | <input type="checkbox"/> Parking Lot |
| <input type="checkbox"/> Umpire Room | <input type="checkbox"/> Ticket Office |
| <input type="checkbox"/> Dugouts | <input type="checkbox"/> Gate A Plaza |
| <input type="checkbox"/> Pitching Mounds | <input type="checkbox"/> Gate C Plaza |
| <input type="checkbox"/> Batting Practice Screens | |
| # Requested _____ | |

11. Event description (must be completed in detail):

(Description should include number of stage(s), other types of entertainment, activities, vendor and sponsor booths, restrooms, ticket booths, dumpsters, fencing, practice sessions, games, etc.)

12. Are you planning to charge admission? Yes No

If yes, how much? _____

13. Are you planning to charge for parking? Yes No

If yes, how much? _____

14. Are you planning on having any type of concessions? Yes No

15. Are you planning on selling alcoholic beverages? Yes No

16. Are you planning on having the public on the field? Yes No

*Roger Dean Chevrolet Stadium will have final approval of number of people allowed on field.

17. What resources or staff will you need us to provide?

*Roger Dean Chevrolet Stadium will determine all final security requirements.

- | | |
|---|---|
| <input type="checkbox"/> Ticket Takers | <input type="checkbox"/> Clean-up Crew |
| <input type="checkbox"/> Ticket Sellers | <input type="checkbox"/> Additional Restrooms |
| <input type="checkbox"/> Ushers | <input type="checkbox"/> Generators |
| <input type="checkbox"/> Greeters | <input type="checkbox"/> Stadium Lighting |
| <input type="checkbox"/> Event Coordinator | <input type="checkbox"/> PA Announcer |
| <input type="checkbox"/> Electrician | <input type="checkbox"/> Music Operator |
| <input type="checkbox"/> Parking Staff | <input type="checkbox"/> Scoreboard Operator |
| <input type="checkbox"/> Security (Other Than Police) | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Jupiter Police | _____ |
| <input type="checkbox"/> Roger Dean Chevrolet Stadium | _____ |
| First Aid | |

18. If an Athletic Event, will you have an Athletic Trainer on-site during your event? Yes No

*Athletic Trainer with a certification that meets all first aid and emergency requirements may substitute for an EMS unit if the general public and event participants will be less than 500 people in attendance during the event

If yes, Name of Trainer _____

Certification of Trainer: _____ Phone: _____

19. If using an outside company for any resources not listed above, please list their information:

*If additional space is needed, please list on a separate sheet and attach.

Company Name: _____

Address: _____

Contact Name: _____ Title: _____

Phone Number: _____ Email: _____

Company Name: _____

Address: _____

Contact Name: _____ Title: _____

Phone Number: _____ Email: _____

20. Are you planning to use music? Yes No

Amplified? (Explain): _____

Type of performance (music)? _____ Live or DJ's? _____

List of Performers: _____

21. Are you planning to have any type of amusement rides? Yes No

If yes, name of company: _____

What type of rides are you planning? All rides must be listed. Additional insurance, above general requirements, will be required.

22. Who are your current sponsors? _____

23. Who are your expected sponsors? _____

*All areas of the facility may be subject to prior sponsor exclusivity through Roger Dean Chevrolet Stadium

Part III. APPLICANT

Organization name: _____

Address: _____

City, State, Zip Code: _____

Phone# _____ Email: _____

Are you a Non-Profit Organization? Yes No

If yes, Tax ID #: _____ (Must submit copy of certificate)

One authorizing official from your organization:

Name: _____ Title: _____

Phone: _____ Email: _____

Cell: _____ Fax: _____

The information I have provided on this application is true and complete to the best of my knowledge. Applicant understands that the dates indicated above will not be reserved until rental deposit and a License to Use Agreement is fully executed by Roger Dean Chevrolet Stadium. If this application is approved, I understand that I must meet all insurance requirements and furnish an original certificate of insurance. Certain areas of the facility may not be available for rent during certain times of the year. In addition, I understand that additional charges may apply in addition to the rental fee. Roger Dean Chevrolet Stadium has right of refusal on all facility rentals.

Signature of Applicant

Roger Dean Chevrolet Stadium

Print Name

Print Name

Title

Title

Date

Date

Please mail, fax, or email completed application and any additional information to:

Roger Dean Chevrolet Stadium
C/o Andrew Seymour
4751 Main Street
Jupiter, FL 33458
(561) 630-1855
Andrew@RogerDeanChevroletStadium.com