## Boulder City Horsemen's Association (BCHA) Arena Reservation Request for BCHA EVENTS:

Please fill out in entirety. Information may be updated closer to event.
Name of Organization
Billing Address (invoice will be sent to this address)
Name of Show/Event
Contact Person Contact Phone
Contact Email Address
Email Address & Phone (given to public)
Areas Requested
Main ArenaLarge Practice ArenaSmall Practice ArenaRound PenRound Pen
Show OfficePA SystemPicnic Area (avail at main arena only)Additional Arena Panels Livestock Pens
# of Stalls (bedding to be shavings only)
Show/Event Dates Start Time End Time
Set-Up/Check-in Date Time
Tear Down/Check-out Date Time
Number of MEMBER Participants Expected
Number of NON-MEMBER Participants Expected (BCHA INSURANCE COVERS MEMBERS ONLY DEPENDENT ON # OF NON-MEMBERS ADDITIONAL INSURANCE CAN BE PURCHASED FOR BCHA HELD EVENTS ONLY-THE EXECUTIVE BOARD WILL PROVIDE YOU WITH THIS COST)  Number of Spectators Expected
Concession Stands/Exhibits? Number of Stands Number of Days
**NO ALCHOL IS ALLOWED TO BE SOLD
*all vendors must have a valid business license and 2m aggregate/1m liability insurance naming Boulder City Horsemen's Association as additional insured turned in 2 weeks prior to event.
Additional activities that may take place during event, please be specific & provide as much info. as possible about event:

## FEES SUBJECT TO CHANGE JANUARY 1ST OF EACH YEAR PER BCHA APPROVAL

I understand that an event is not confirmed required documentation is received.	·		-	
Event Representative/Title Date				
* Additional deposit may be required deper	nding on type and du	ration of event.		
PROSPECTIVE CHARGES:				
MAIN ARENA \$300				
SMALLER ARENA \$100				
LIGHTS: \$15.00 per hour				
TRACTOR: \$				
OTHER FEES TBD IF APPLICABLE				
FOR OFFICIAL USE ONLY:				
DATE RECEIVED BY BCHA SECRETARY:				
DATE REVIEWED BY EXECUTIVE BOARD:	APPROVED	APPROVED YES NO		
ADDITIONAL INFORMATION NEEDED IF NECESS.				
DATE DOCUMENTS RECEIVED:				
DATE DEPOSIT RECEIVED:	AMOUNT:	CK#:	Paypal:	
DATE BALANCE RECEIVED:	AMOUNT:	CK#:	Paypal:	
OTHER COMMUNICATION LOG:				
DATE/INFO:				
DATE/INFO:				
DATE/INFO:				

DATE/INFO: \_\_\_\_\_