

SECTION 4

The following documents are required:

- ___ Provide letter with full description of request, purpose, and benefit to the Doral residents and/or City staff, must use official letterhead (Exception - Visiting Dignitaries Category);
- ___ Proposed schedule of activities, meetings, and agenda;
- ___ Number of expected guests (including speakers/presenters) - # _____;
- ___ Plans for security (if required);
- ___ Proof of 501 (c) (3) Non-for-profit status (if applicable);
- ___ Sample of advertisement (e.g. flyer/brochure/invite, etc.), include listing of all media (if applicable);
- ___ Drawing/sketch of room/table layout;
- ___ Proof of residency (if required);
- ___ All applicable Insurance/Liability (Event purpose only);
- ___ List IT equipment being utilized by Applicant; and

(Note: Only items included in request Letter and submitted will be considered.)

Required Attachments

SECTION 5

Select purpose of use: [select only one]

- Meeting Workshop Reception Symposium Gala
 Other: _____

Select if applicable:

- Open to City residents "Only"
 Open with no restrictions "Open to all"
 Use of facility for art or cultural purpose
 Admission, registration, or donation fee charged
 Food and drinks will be served
 Media attending/recording during use of Facility

For Logistical Purpose

The following exhibit to this application is fully incorporated herein as if set forth at length:

- Exhibit A - Facility Use Guidelines

By signing this Application, the Applicant affirms receiving and reviewing the Facility Application Request Form and Guidelines.

This Applicant further certifies that the Applicant's policy-making body shall adhere to all stipulated requirements per the City's Policies and Procedures.

Applicant Name & Title: _____
(Print Name/Title)

Applicant Signature: _____ Date _____

ADMINISTRATION USE ONLY

___ Approved ___ Denied by: _____
Public Affairs Division Date _____

Approved as to Form & Legal Sufficiency for the _____
Use and Reliance of the City of Doral Only: Office of the City Attorney Date _____

___ Approved ___ Denied by: _____
Office of the City Manager Date _____

If applicable:
Council Date: _____ Council Item No.: _____ Action Taken: _____