



CRABTREE MEMORIAL GYMNASIUM RENTAL RULES AND REGULATIONS

- Customers must complete the Facility Use Application below and provide a deposit.
- Please abide by requested time of rental. Allow for set-up and clean-up time in your request.
- Customers are not allowed to smoke in the building or on the grounds.
- Customers are responsible for cleaning the rented area at the end of their function.
- Customers are responsible for proper disposal of garbage accumulated during their function. ***(Dumpster is located in rear of building.)***
- The facility must be returned to the exact condition in which you found it unless directed otherwise.
- Customers are responsible for any damages to the facility.
- Customers are not allowed to use any equipment that belongs to the center unless noted in the terms of the rental agreement or by written consent of center staff.
- Customers are not allowed to nail anything to the doors, walls or partitions.
- Customers are not allowed to hang items from the ceiling.
- No sparklers or other fireworks are allowed on the property. Fireworks are illegal within the city limits of Myrtle Beach.
- Customers are not allowed to use smoke machines or burn candles inside the building. **NO EXCEPTIONS!**
- Alcohol is not allowed during normal business hours.
- All alcohol must be served in plastic cups. **NO EXCEPTIONS!**
- Customers are responsible for understanding and enforcing center rules and monitoring participant activity during the function.
- Customers agree to follow instructions of center staff.

I understand these rules and regulations and agree to abide by them.

Applicant Signature

Date

Center Staff Signature

Date

CRABTREE MEMORIAL GYMNASIUM RENTAL FEE SCHEDULE

Gymnasium Rental

Civic Rate City Resident	Civic Rate Non City Resident	Non Civic Rate City Resident	Non Civic Rate Non City Resident
\$75.00 per hour or \$300.00 per day	\$130.00 per hour or \$505.00 per day	\$120.00 per hour or \$400.00 per day	\$205.00 per hour or \$670.00 per day

Small Meeting Room Rental (Includes tables and chairs)

Civic Rate City Resident	Civic Rate Non City Resident	Non Civic Rate City Resident	Non Civic Rate Non City Resident
\$20.00 per hour	\$35.00 per hour	\$35.00 per hour	\$60.00 per hour

If additional tables and chairs are needed, they must be provided by the renter. Setup and delivery of additional tables must be coordinated with the city.

A minimum deposit of \$200.00 is required on all rentals. If the estimated rental cost is less than \$200, the entire fee must be returned with the Facility Use Application and Event Résumé to secure rental. The following conditions must be agreed upon prior to rental:

- Walls, floors, tables and chairs are undamaged.
- All trash is placed in cans provided.

Staffing Fees and Labor Costs – Additional fees for services in connection with the use of facilities are as follows. The rates are the same for civic and non-civic users. Staffing fees charged for facility rentals during non business hours will include overtime and or holiday rates.

- **Basic Labor during regular business hours** \$20.00/hour/person
- **Overtime Rate during non business hours** \$30.00/hour/person
- **Holiday Rate (on a City Holiday if staff is available)** \$50.00/hour/person
- **Clean-Up Costs** may be charged per site, depending on the amount of clean-up required. (\$200.00 - \$1,200.00)

Civic is defined as:

1. Government Agency
2. Registered Civic Organization (Rotary, Jaycees, etc.)
3. Church Organizations
4. Any other organization registered through the State of South Carolina as a charitable organization.
5. Individual requesting the use of a facility for a "Not For Profit" function.

City Resident rates are charged to those who live in the city or own businesses inside city limits. Be prepared to show proof of residency with a valid driver's license or other picture identification with the home street address listed. Copy of business license or tax bill can be shown for proof of business ownership.

**CITY OF MYRTLE BEACH
FACILITY USE APPLICATION**

APPLICANT NAME: _____

PHONE: _____ **PHONE:** _____

(Residence)

(Business)

ADDRESS: _____

CITY _____ **STATE** _____ **ZIP** _____

EMAIL ADDRESS: _____

ORGANIZATION: _____

ADDRESS: _____

CITY _____ **STATE** _____ **ZIP** _____

FACILITY TO BE USED: _____

BEGINNING DATE: _____ **TIME:** _____ **ENDING DATE:** _____ **TIME:** _____

DETAILED DESCRIPTION OF ACTIVITY: _____

- THE SALE OR DISTRIBUTION OF ALCOHOLIC BEVERAGES IS STRICTLY PROHIBITED, UNLESS APPROVED BY THE CULTURAL AND LEISURE SERVICES SUPERINTENDENT.
- VEHICLES ARE NOT PERMITTED TO STOP, STAND OR PARK OTHER THAN IN DESIGNATED PARKING, LOADING OR UNLOADING ZONES EXCEPT WITH THE SPECIFIC WRITTEN PERMISSION OF THE POLICE DEPARTMENT (TO BE ATTACHED TO THIS DOCUMENT).
- THE CITY RESERVES THE RIGHT TO APPROVE OR DISAPPROVE THE TYPE, NUMBER AND PLACEMENT OF ALL STRUCTURES, INCLUDING BUT NOT LIMITED TO TENTS, BOOTHS, DISPLAYS AND COOKING APPARATUS.
- IT IS AGREED AND UNDERSTOOD THAT PERMITTEE IS SOLELY RESPONSIBLE FOR THE CONDITION AND CLEANLINESS OF FACILITY USED DURING THE TERM OF THIS PERMIT AND AGREES TO RETURN SAID PROPERTY IN THE SAME CONDITION AS FOUND, REASONABLE WEAR AND TEAR EXCEPTED.
- PERMITTEE AGREES TO ARRANGE FOR AND ASSUME THE COST OF PROVIDING SECURITY AND CROWD CONTROL WHEN SUCH IS DEEMED NECESSARY BY THE CITY.
- PERMITTEE AGREES TO CONDUCT ALL ACTIVITIES IN COMPLIANCE WITH THE LAWS OF THE STATE OF SOUTH CAROLINA AND ALL APPLICABLE CITY ORDINANCES.
- PERMITTEE AGEES TO PURCHASE AND MAINTAIN IN FORCE FOR THE FULL TERM OF THIS PERMIT A GENERAL LIABILITY POLICY MEETING THE FOLLOWING CRITERIA.
 - 1) Coverage shall be written on an occurrence basis and provide Premises/Operations, Independent Contractors, Products/Completed Operations, Contractual and Broad Form Property Damage.
 - 2) Minimum limits of liability will be \$ _____ combined single limit per occurrence for bodily injury and property damage.
 - 3) The City of Myrtle Beach shall be named as an "additional insured" and the policy endorsed to require that the City be provided thirty (30) days written notice in the event of coverage modification or cancellation.
 - 4) A certificate of insurance will be provided to the City ten (10) days prior to the beginning date of the event permitted herein.
 - 5) Additional limits may be required to address special or unusual hazards.

- PERMITTEE AGREES UPON DIRECTION OF THE CITY TO IMMEDIATELY CEASE ACTIVITY IN THE EVENT OF INSURANCE CANCELLATION UNTIL PROOF OF COVERAGE SATISFACTORY TO THE CITY IS RESUBMITTED.
- PERMITTEE AGREES TO PROTECT, DEFEND, INDEMNIFY, AND HOLD THE CITY, ITS OFFICERS, EMPLOYEES AND AGENTS FREE AND HARMLESS FROM AND AGAINST ANY AND ALL LOSSES, PENALTIES, DAMAGES, SETTLEMENTS, COSTS, CHARGES, PROFESSIONAL FEES OR OTHER EXPENSES AND LIABILITIES OF EVERY KIND AND CHARACTER ARISING OUT OF THIS PERMIT.
- PERMITTEE AGREES AND UNDERSTANDS THAT THE CITY MAY REVOKE AND TERMINATE THIS PERMIT UPON A FINDING BY THE CITY THAT PERMITTEE'S USE OF THE FACILITY IS DETRIMENTAL TO THE SAFETY, WELFARE, HEALTH OR BEST INTERESTS OF THE CITIZENS OF THE CITY OF MYRTLE BEACH.
- PERMITTEE UNDERSTANDS THAT VENDORS, PERSONS, OR BUSINESSES PARTICIPATING IN THE EVENT OR PROVIDING PAID SERVICES TO THE ORGANIZER OF THE EVENT MAY BE REQUIRED TO PURCHASE A CITY OF MYRTLE BEACH BUSINESS LICENSE. IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE THAT EACH PERSON OR BUSINESS IS IN COMPLIANCE WITH THE BUSINESS LICENSE ORDINANCE. ANY QUESTIONS REGARDING THIS REQUIREMENT SHOULD BE DIRECTED TO THE CITY BUSINESS LICENSE OFFICE AT 843-918-1200.

 APPLICANT SIGNATURE

 DATE

ALCOHOLIC BEVERAGES REQUESTED: YES _____ NO _____

APPROVED: _____ DISAPPROVED: _____ CONDITIONS: _____

REASON FOR DISAPPROVAL:

RECREATION SERVICES DIRECTOR'S SIGNATURE

APPROVED: _____ DISAPPROVED: _____ CONDITIONS: _____

REASON FOR DISAPPROVAL:

RECREATION SERVICES STAFF SIGNATURE

APPROVED: _____ DISAPPROVED _____ CONDITIONS: _____

REASON FOR DISAPPROVAL:

POLICE DEPARTMENT OFFICER SIGNATURE

MAIL OR FAX APPLICATIONS TO:

CITY OF MYRTLE BEACH
ATTN: WANDA BODINE
PO BOX 2468
MYRTLE BEACH, SC 29578
PHONE: 843-918-1191
FAX: 843-918-1137

FOR MORE INFORMATION:

TRAIN DEPOT	843-918-4906
GENERAL ROBERT H. REED RECREATION CENTER	843-918-2380
CRABTREE MEMORIAL GYMNASIUM	843-918-2355
MARY C. CANTY RECREATION CENTER	843-918-1465
CITY PARKS	843-918-2332

Section 19-127 (c) (6) of the Code of Ordinances of Myrtle Beach provides: In consideration of current demands on public resources made during the **month of May**, no special event permit, noise variance, or facility use permit with outdoor vending, merchandise, or food or beverage sales, as otherwise permitted by law, may be issued from May 1 through midnight of May 31 of every year, if such permit or variance overlaps or coincides with an unpermitted rally that is held forth as occurring on specified days and is reasonably perceived by the council acting in its discretion as being held in furtherance of or to take advantage of an unpermitted rally, to include either five days before or five days after the time of the rally as set forth.

ADA Notice: The City of Myrtle Beach will not discriminate against qualified individuals on the basis of disability in its services, programs or activities. The city will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy its programs, services and activities. For more information, contact Docshee Moore at Mary C. Canty Recreation Center (843-918-1465), Kevin Morris at Pepper Geddings Recreation Center (843-918-2280), Rob Cardella at Crabtree Memorial Gymnasium (843-918-2355), Dustin Jordan at General Robert H. Reed Recreation Center (843-918-2380), Troy Marron at the Train Depot (843-918-4906), Rhonda Edge for Parks and Picnic Shelter rental (843-918-2332) or ADA Coordinator Angela Kegler (843-918-1113).

**CITY OF MYRTLE BEACH
EVENT RÉSUMÉ**

Please complete this form in its entirety. If a question does not apply, please write N/A.

Applicant's Name: _____

Event Information:

Event Name: _____

Date & Time of Event: _____

Date & Time of Set-Up: _____ Date & Time of Breakdown: _____

Public or Private Event: _____ Expected Attendance: _____

Number of your staff who will be present: _____

Will this be catered, have bands or have any other outside vendors? (Y/N) _____

If yes, please explain: _____

Details of Event:

Is your group or organization registered as non-profit (Y/N)? _____

Is your event being sponsored by or for the benefit of a charity, religious organization, 501(c)3 coporation, civic group, fraternal organization, or mutual benevolent aid association (Y/N)? _____ If yes, please provide the name of the organization and attach a signed statement from that organization on its letterhead affirming the sponsorship or benefit to the organization. _____

Will this event have an admission fee, require tickets, charge for food and beverage, or collect money for any purpose (Y/N)? _____ If yes, please explain: _____

Do you plan to serve or allow guests to bring alcoholic beverages (Y/N)? _____

Do you plan to decorate (Y/N)? _____ What type of decorations? _____

Do you plan to display signage (Y/N)? _____ If yes, what and where? _____

Do you plan to have any structures such as tents, stages, etc. (Y/N)? _____

If yes, what kind, when will they be installed and who will install these structures? _____

Do you plan to cook on-site (Y/N)? _____ If so, how? _____

Please describe set up requirements: _____

Do you plan to have entertainment (Y/N)? _____ If yes, what kind and who? _____

Are you requesting closing of streets (Y/N)? _____ Which ones? _____

What is your plan for parking? _____

What is your plan for clean up? _____

Do you plan to use the electricity provided in the facility/park (Y/N)? _____
(If yes, please fill out the electrical attachment.)

Do you plan to hire off-duty police or private security (Y/N)? _____ If yes, who and
how many? _____

Has security been approved by Myrtle Beach Police Department? _____

What is your plan in case of medical/police emergency? _____

Please explain all activities you plan to do at the facility: _____

What area of the park/facility do you plan to use? _____

Site Plan: (If it's a birthday party or family reunion, site plan is not required.)



Applicant Signature: _____ Date: _____

EVENT RÉSUMÉ ADDENDUM ELECTRICAL NEEDS

What equipment do you plan to use that needs electricity? (If possible, give wattage and voltage for each.)

	Equipment	Watts	Volts
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

- Not all parks have electric circuits available. Please ask when filling out the application if the park you want to rent has electricity available.
- Equipment such as coffee makers, popcorn poppers, cotton candy machines and other cooking equipment or motor driven equipment may need to be on a circuit by itself. Please contact staff prior to your event to see if all of your equipment listed can be accommodated by the available electricity.
- If any of your equipment needs 240 volts, please check with staff to see if it is available.
- If 240 volt service is available, a licensed electrician must make any electrical “taps” required to make that equipment work.
- If a band is performing at your event and requires more than the 120 volt convenience outlets provided, please contact staff prior to tapping into the panel box. As listed above, a licensed electrician must make that tap.



CITY OF MYRTLE BEACH

Event Information

CITY OF MYRTLE BEACH, P O BOX 2468, MYRTLE BEACH, SC 29578
PHONE (843) 918-1200 FAX (843) 918-1210

Date Completed	Checked By
Name of Activity/Event:	_____
Description of Event:	_____
Location of Event:	_____
Applicant/Promoter:	_____
Phone Number:	_____
Business License Number:	_____
Email:	_____

If your business is classified as a not for profit or nonprofit business, you will need to submit a copy of any paperwork received from the IRS or the State for review. This documentation is required for the Business License Office to determine if your business and event participants may be exempt from the requirements of the Business License Ordinance.

A participant list must be completed for each event. A participant is considered to be a person or business that provides a service, including, but not limited to, vendors (both retail and food), production companies that will set up the stage, the company hired to put in fencing, portable toilets, bands, DJs, etc. All W-2 employee(s) of the participants are covered under the participant fee. If any participant has a 1099 (contracted labor) employee(s), then each 1099 employee is considered to be a separate participant and the \$10.00 participant fee would apply for each. Any participant that holds a current City of Myrtle Beach Business License would be exempt from the \$10.00 participant fee.

What is the difference between a W-2 employee and a 1099 contract employee?

A W-2 employee receives a payroll check in which payroll taxes are deducted from the employee's paycheck and then paid to the appropriate governmental agency by the employer.

A 1099 contract employee receives a check in which no payroll taxes have been deducted. The contract employee is responsible to pay the appropriate payroll taxes to the appropriate governmental agency on their own.

Employers use Form W-2 *Wage and Tax Statement*, to:

- Report wages, tips, and other compensation paid to an employee.
- Report the employee's income and Social Security taxes withheld and other information.
- Report wage and withholding information to the employee and the Social Security Administration. The Social Security Administration shares the information with the Internal Revenue Service.

Payers use Form 1099-MISC *Miscellaneous Income*, to:

- Report payments made in the course of a trade or business to a person who is not an employee or to an unincorporated business.
- Report payments of \$10 or more in gross royalties or \$600 or more in rents or compensation. Report payment information to the IRS and the person or business that received the payment.

The promoter is required to provide a synopsis of the event. For example: you will need to provide the date and time that the set up will begin and a detailed outline and timeline of the event.

If it is determined that you are required to obtain a business license, you will need to complete the business license application form with the Business License Office. You may contact our office at (843) 918-1200, or you can obtain the business license application from our website at www.cityofmyrtlebeach.com. The business license approval process may take 7 to 10 business days; therefore, you are advised to apply as soon as possible to avoid any delays. If there is additional information needed or an issue with your application; additional time may be required. Your participant list will need to accompany your business license application. The Business License Office will determine the amount that you will be required to remit for your participants. Payment of the participant fees are required at least 7 to 10 business days prior to your event.

The City of Myrtle Beach may issue wristbands that would be required to be worn by each participant, W-2 employee(s) and 1099 contracted employee(s) for the duration of the event. City Code Enforcement staff will be checking to make sure each participant in the event has the required wristband for the event and that it is secured correctly to their wrist. If you have any questions or need additional wristbands for this event, please contact the Business License Office at (843) 918-1200. Any participants that are found to be non-compliant will cause us to notify you and an additional fee may be imposed.

Any participant selling prepared foods, beverages (beer, wine or liquor) or charging admissions, will be required to collect and remit the City of Myrtle Beach 1% Hospitality Fee. Prior to the event, any business not physically located inside the city limits of Myrtle Beach is required to complete a Hospitality Fee application and pay a \$200 filing fee. At the conclusion of the event, the Hospitality Fee reporting form must be filed and the \$200 filing fee will be applied. If a balance remains, the balance must be remitted with the Hospitality Fee reporting form. If an overage remains, a refund will be processed and mailed to the participant. The participant needs to contact the South Carolina Department of Revenue at (843) 839-2960 and the Horry County Treasurers Office at (843) 915-5620 to find out their regulations and tax requirements. If there will be on-site consumption of beer, wine and/or liquor, you will need to contact the South Carolina Department of Revenue to apply for the appropriate ABL permits and you will need to provide a copy of the permits to the Business License Office.



CITY OF MYRTLE BEACH

Hospitality Account Application

CITY OF MYRTLE BEACH, P O BOX 2468, MYRTLE BEACH, SC 29578
PHONE (843) 918-1200 FAX (843) 918-1210

Welcome to the City of Myrtle Beach! This form must be completed and will be used to establish a Hospitality Fee account with the City of Myrtle Beach Finance Department. This form is for businesses that are required to collect hospitality fees, which would include food and beverage vendors, and businesses that charge admissions.

Events that charge an admission fee for attendance are subject to the Myrtle Beach Hospitality Fee, Horry County Hospitality Fee, and the State of South Carolina Admissions Tax. An admission ticket is subject to a total of 7.5% in Admission Tax and Hospitality Fees. The 7.5% is broken down as follows: 1% Myrtle Beach Hospitality Fee, 1.5% Horry County Hospitality Fee, and 5% SC Admissions Tax. You are responsible to collect the Admission Tax and Hospitality Fees and report the amount collected to each governmental agency separately.

Events that have prepared foods and beverages are subject to the Myrtle Beach Hospitality Fee, Horry County Hospitality Fee, and the State of South Carolina Sales Tax. Prepared foods and beverages are subject to a total of 10.5% in Sales Tax and Hospitality Fees. The 10.5% is broken down as follows: 1% Myrtle Beach Hospitality Fee, 1.5% Horry County Hospitality Fee, and 8% SC Sales Tax. You are responsible to collect the Sales Tax and Hospitality Fees and report the amount collected to each governmental agency separately.

Note: South Carolina may provide an exemption from some taxes for certain events. To obtain information on this exemption, you must contact the SC Department of Revenue at (803) 898-5471. If your event is exempt from SC taxes, your event may also be exempt from Myrtle Beach Hospitality Fees. You must provide proof of your South Carolina exemption. If you have any questions, please call the Finance Department at (843) 918-1200.

You are required to remit a \$200 filing fee with this completed application. The filing fee must be paid by cash, cashier's check or money order, credit cards are not accepted. Upon receipt of this application and filing fee, Myrtle Beach will provide you with your Hospitality Fee reporting form. It is your responsibility to obtain reporting forms from the SC Dept. of Revenue (803) 898-5471 and the Horry County Treasurers Office (843) 915-5620. At the end of your event, you are required to file your Myrtle Beach Hospitality Fee report. You should deduct the \$200 filing fee paid and remit any balance remaining. If the filing fee exceeds your Myrtle Beach Hospitality Fee collections, you may be entitled to a refund provided you have properly filed your report to the City of Myrtle Beach. At the end of the event, you should also file the appropriate reporting forms with the SC Department of Revenue and the Horry County Treasurers Office.

Business Name: _____

Corporate Name: _____

Owner First Name: _____ Last Name: _____

Federal ID: _____ Event Dates: _____ to _____

Name of Event: _____

Mailing Address: (Attn) _____

(Street) _____

(City, State, Zip) _____

Contact Name: (First) _____ (Last) _____

(Attn) _____

(Street) _____

(City, State, Zip) _____

Phone: (with area code)(_____) _____ - _____ Fax: (with area code)(_____) _____ - _____

E-mail Address: _____

Do you have a Hospitality Fee account with the City? _____ If yes, account # _____

Will you be returning to the City for a second event this year? _____

Are you exempt from South Carolina Admissions Tax? _____ If yes, attach a copy of your exemption certificate with this completed form.



CITY OF MYRTLE BEACH
BUSINESS LICENSE DIVISION
EVENT/VENDOR INFORMATION

P.O. BOX 2468 MYRTLE BEACH, SC 29578
921 N OAK STREET MYRTLE BEACH, SC 29577
(843)918-1200 Fax (843)918-1210
WWW.CITYOFMYRTLEBEACH.COM

Issue Date _____ First Draft Due Back 15 Days from Issue Date Due Date _____

Final Draft due back 15 days prior to event Due Date _____

If there are not any changes from the 1st draft then submit a statement as a final draft.

EVENT DATE(S) _____

EVENT NAME _____

TYPE OF EVENT _____

LOCATION OF EVENT _____

CONTACT PERSON _____ PHONE _____

EMAIL ADDRESS _____ PHONE _____

A Complete Event/Vendor Listing Consists of:

1. **Complete name of person and/or business that will be a vendor or a service provider at the event. If this is not applicable then please indicate with a N/A in the appropriate section.**
2. **Complete mailing address of vendor or service provider and phone number.**
3. **Vendor or service provider's contract amount for the event.**

All information must be completed in full when you return the Event/ Vendor Listing to the Business License Department.

If you have any person or business that is not being compensated for their services please list them in the provided space below.

Please Sign and date this Event/Vendor Listing and return it to the City of Myrtle Beach Business License Office.

Signature

Date

EVENT PLANNER

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

EQUIPMENT RENTAL

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

CATERER

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

D.J.

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

ENTERTAINMENT

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

PHOTOGRAPHER

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

VIDEOGRAPHER

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

FLORIST

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

CAKE/BAKER

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

DECORATOR

COMPANY NAME _____ BUSINESS LICENSE NUMBER _____
CONTACT NAME _____ HOSPITALITY NUMBER _____
TELEPHONE _____ CONTRACT VALUE \$ _____
MAILING ADDRESS _____
EMAIL ADDRESS _____

OFFICIANT

COMPANY NAME _____	BUSINESS LICENSE NUMBER _____
CONTACT NAME _____	HOSPITALITY NUMBER _____
TELEPHONE _____	CONTRACT VALUE \$ _____
MAILING ADDRESS _____	
EMAIL ADDRESS _____	

(Describe Business)

COMPANY NAME _____	BUSINESS LICENSE NUMBER _____
CONTACT NAME _____	HOSPITALITY NUMBER _____
TELEPHONE _____	CONTRACT VALUE \$ _____
MAILING ADDRESS _____	
EMAIL ADDRESS _____	

(Describe Business)

COMPANY NAME _____	BUSINESS LICENSE NUMBER _____
CONTACT NAME _____	HOSPITALITY NUMBER _____
TELEPHONE _____	CONTRACT VALUE \$ _____
MAILING ADDRESS _____	
EMAIL ADDRESS _____	

(Describe Business)

COMPANY NAME _____	BUSINESS LICENSE NUMBER _____
CONTACT NAME _____	HOSPITALITY NUMBER _____
TELEPHONE _____	CONTRACT VALUE \$ _____
MAILING ADDRESS _____	
EMAIL ADDRESS _____	
