



CITY OF PROVIDENCE

Angel Taveras, Mayor

Special Event Request Form

Organization's Information:

Name of authorized representative or individual _____

Name of Organization _____

Address _____ City _____, State _____ Zip _____

Primary Phone Number () _____ Secondary Phone Number () _____

Email Address _____ Fax Number () _____

Organization producing event is (please check one):

[] Individual [] Commercial [] Non-Profit [] Non-Profit with 501C3 tax exempt status [] Political

Preferred Date(s) for Event: 1. _____ 2. _____ 3. _____

Preferred Start Time _____ AM PM Preferred End Time _____ AM PM

Type of Event (check all that apply):

- [] Concert [] Photography [] Religious Ceremony
[] Festival [] Picnic [] Run/Walk
[] Film/Video Shoot [] Press Conference [] Other
[] Parade [] Reception/Party

Location of Event:

- [] Roger Williams Park Casino
[] Roger Williams Park Botanical Center
[] *Roger Williams Park
[] *Neighborhood Parks or Downtown Parks

Anticipated number of attendees:

- [] 1-100 people
[] 101-500 people
[] 501-2500 people
[] 2501-5000 people
[] 5001 people or more

Please email completed form to hmanning@providenceri.com or send c/o Facilities Coordinator at the address below or fax to (401) 941-5920. Once the request form has been received, a coordinator will contact you to facilitate the application. Office phone (401) 785-9450 ext. 240.

*Describe the particular area(s) within the park you are interested in. Also, provide the park name for Neighborhood & Downtown Parks.

PROVIDENCE THE CREATIVE CAPITAL