



# EVENT RFP

Only completed profiles will be considered.

In order to proceed with planning your event, the following information is required. Once we receive the completed profile, you will be contacted by a Sales Manager, and a proposal, with pricing and venue details, will be generated. Please mail, fax, or email the completed form using contact information provided below.

## Event Contact Information

Person Completing this Form:		Title:	
Official Event Contact:		Title:	
Company Name:			
Address:			
Company Type: ( ) 501(c)3 Non-Profit ( ) Corporation ( ) Limited Liability Co. ( ) Limited Liability Partnership ( ) Limited Partn.			
( ) Sole Proprietorship ( ) Gov't Agency		Is the Company Tax Exempt? ( YES / NO )	Tax ID #:
E-Mail Address:		Website:	
Phone Number:		Fax:	
How did you hear about us? ( ) Internet Search ( ) CVENT ( ) Zentila ( ) PartyRVA.com ( ) Word of mouth ( ) Other:			

## Event Information

Type of Event (Mark One):

- ( ) Athletic / Sporting Event    ( ) Banquet    ( ) Consumer / Public Show    ( ) Convention  
 ( ) Special Event / Celebration    ( ) Trade Show    ( ) Wedding    ( ) Other: \_\_\_\_\_

Event Name: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Preferred Dates: \_\_\_\_\_ Alternate Dates: \_\_\_\_\_

Event Times / Schedule: \_\_\_\_\_

Expected Attendance: \_\_\_\_\_

Description / Age of Attendees: \_\_\_\_\_

## Space Requirements

Please specify if your event will require any of the following items (YES/NO). If yes, please provide additional information requested:

General Session Space: \_\_\_\_\_ Stage Size / AV Setup: \_\_\_\_\_

Number of Attendees: \_\_\_\_\_

Seating Style (Theater / Classroom / Rounds): \_\_\_\_\_

Meeting / Breakout Rooms: \_\_\_\_\_ Number of Breakouts: \_\_\_\_\_

Number of Attendees: \_\_\_\_\_

Seating Style (Theater / Classroom / Rounds): \_\_\_\_\_

Exhibit Space for Vendors: \_\_\_\_\_ Number of Vendors: \_\_\_\_\_

Approximate Square Footage: \_\_\_\_\_

Table-Top Exhibits or Booths: \_\_\_\_\_

Will vendors require electricity? \_\_\_\_\_

Food Functions: \_\_\_\_\_ Number of Food Functions: \_\_\_\_\_

Telecommunications / Internet Needs: \_\_\_\_\_

Audio Visual Needs: \_\_\_\_\_

## Other Information

Please respond regarding the following items (YES/NO). If yes, please provide additional information requested:

Does the event require hotel rooms? \_\_\_\_\_ Peak Room Nights: \_\_\_\_\_ Total Room Nights: \_\_\_\_\_

Is this a public, ticketed event? \_\_\_\_\_ Will tickets be sold in advance? \_\_\_\_\_

Will tickets be sold on-site / day-of? \_\_\_\_\_

Ticket Prices: \_\_\_\_\_

Is this a private event? \_\_\_\_\_ Is pre-registration required? \_\_\_\_\_

Will items be sold at the event? \_\_\_\_\_ List items to be sold: \_\_\_\_\_

Does company have a corporate general liability insurance policy? \_\_\_\_\_

Would you like your event posted on our website? \_\_\_\_\_

## Food & Beverage

Please specify if your event will require any of the following items (YES/NO). If yes, please provide additional information requested:

Food & Beverage Service: \_\_\_\_\_ Meal Times (Breakfast / Lunch / Dinner): \_\_\_\_\_  
Break Times (AM / PM): \_\_\_\_\_  
Alcohol: \_\_\_\_\_ Open Bar / Cash Bar: \_\_\_\_\_  
Cultural Food Requirements: \_\_\_\_\_ Please Specify: \_\_\_\_\_

**Aramark is the exclusive food and beverage provider of the Greater Richmond Convention Center. All bars will be operated by Aramark, as they are the administrator of the on-site ABC License. No percentage of profits will be shared from alcohol sales, concessions, or any other food and/or beverage order.**

## Additional Comments

Please provide any additional information / special requests not previously covered. \_\_\_\_\_

## Event History & References

Is this a first time event? (YES/NO) \_\_\_\_\_ If no, please complete section below.

In the event that you and/or your associates have not planned an event in the past, you may leave the following area blank. If you do have event planning experience, please fill out the following information regardless of the similarity to your current and past events.

Event Name: \_\_\_\_\_  
Event Dates: \_\_\_\_\_  
Venue Name: \_\_\_\_\_  
Venue Location (City, State): \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Contact Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Event Dates: \_\_\_\_\_  
Venue Name: \_\_\_\_\_  
Venue Location (City, State): \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
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Event Dates: \_\_\_\_\_  
Venue Name: \_\_\_\_\_  
Venue Location (City, State): \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Contact Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**On behalf of the Greater Richmond Convention Center team, thank you for your interest in our facility and for your prompt attention in providing us with this vital event information. If you have any questions, please call 804-783-7334 or fax (804) 225-0508**

**Email:** Erin Hawkins, Sales Coordinator @ [EHawkins@greaterrichmondCC.com](mailto:EHawkins@greaterrichmondCC.com)

### **Mailing Address:**

Greater Richmond Convention Center  
Attn: Sales Coordinator  
403 N. Third Street  
Richmond, VA 23219