

Email: \_\_\_\_

## Idaho State Capitol

## **PUBLIC EVENT RESERVATION REQUEST FORM**

and Statement of Responsibility

Form Version: April 2018 Previous versions will not be accepted.

	Trevious versions will not be decepted.
1 DESIRED LOCATION AND EQUIPMENT:	5 AGREEMENT & STATEMENT OF RESPONSIBILITY:
☐ Capitol Interior, Rotunda 2 <sup>nd</sup> Floor☐ Lectern (no PA system)	By signing you confirm that you have fully read, understood, & acknowledge your responsibility to abide by IDAPA 38, title 4, chapter 8, found at: adminrules.idaho.gov/rules/current/38/
Capitol Exterior Steps, South Side Lectern (no PA sytem)	
Lectern (with PA system)	SIGNATURE:
	Print Name:
2) DATE AND TIME YOU'D LIKE TO RESERVE:	Your relationship to event sponsor (as listed in box 4):
Date:	
Reservations may be made a minimum of 2 business days and a maximum of 6 months in advance.	Date:
Start Time: AM / PM	6 SUBMIT SIGNED FORM:
End Time: AM / PM	Use any method below to submit this <u>signed</u> form.
Available hours: Max Time Allowed:  Mon-Fri: 7:00am-7:00pm Rotunda: 8 hours	EMAIL (fastest): CapitolEvent@adm.idaho.gov
Sat, Sun, Holidays: 9:00am-5:00pm Steps: 4 hours	FAX: 208-334-4033
	MAIL/DELIVER: Idaho Public Works
3 ABOUT THE EVENT:	502 N. 4 <sup>th</sup> Street
Event Name/Description:	Boise, ID 83702
	WHAT'S NEXT?
Approx. number of attendees expected:	We'll confirm availability of the date and time you've
Who will be managing this event on-site?	requested. Within 2 business days, you'll receive a
(Name)	confirmation by email to the email address you entered in Box 4. This completed form will be attached to that
	email, and serves as your reservation permit.
(Mobile phone)	More info/instructions: cms.idaho.gov
	For help with this form: 208-332-1930
4 ABOUT EVENT SPONSOR/ORGANIZER:	For help on-site during event: 208-334-3468
Sponsor/Organizer:	OFFICE USE ONLY – DO NOT WRITE HERE
Address:	Notes:
Phone	

Approved by: \_\_\_