Re: Parks & Recreation Commission

Arleen Lewis

Mon 7/1/2024 9:10 PM

To:Kinard, Johanna <j_kinard@ci.lompoc.ca.us>

① 1 attachments (27 KB)
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To: PARKS AND REC. COMMISION.

The Lompoc District Libraries Foundation has been supporting our local District's libraries for years we have donated to the District's Libraries over two million dollars since the beginning.

Our major fundraiser this year which we will be hosting and requesting \$1,000.00 Sponsorship is being held on October 12, 2024. the location will be at Anderson Recreation Center from 5 pm 9 pm there will be two performers.

Our event which consists of a Professional Elvis Presley impersonator along with a Frank Sinatra Style Singer. The sponsorship, contribution from Lompoc Parks and Recreation will allow us to give the proceeds after expenses solely to Charlotte's Web Mobile Children's Library...

At our event, doors open at 5pm. Guests can find their reserved tables or seats and have some complimentary appetizer or purchase a beverage of their choice.

The Show starts at 6pm (Danny Memphis) comes on as ELVIS for one hour then a small fifteen minibreak then ringing of bell for start of second show which will be (Jerry Costanzo) who sings Frank Sinatra Smooth style songs and music live. . If anyone would like to dance during either show it will be allowed.

We would like to use the kitchen and bar for serving our guests our complimentary appetizers or purchase a beverage.

On behalf of the Lompoc District Libraries Foundation thank you for your consideration of a \$1,000.00 Sponsorship.

Arleen Lewis Vice President:

Lompoc District's Libraries Foundation

Special Event Application Lompoc Recreation Division 125 West Walnut Avenue Lompoc, CA 93436

Phone: (805) 875-8100 Fax: (805) 736-5195

APPLICANT INFORMATION Applicant (Your Name) AR LECH	Lewis	Organization Lom	ooc Districts Lik	overy
Applicant (Your Name) AR lech Event Coordinator (if different from applicant)	Anleen	ewis Vice	Pres.	<u>り</u> にろ -
Mailing Address <u> </u>	Lompoc	CA 93436		_
Day Phone:e	r Hours Phone:	<i></i>	ax:	-
Public Information Phone:	E-m	il: <u> </u>		\
Secondary Contact Name: Melind	a Aguirre Pho	ne:	<u> </u>	
Please complete the following sections with as much	ch detail as possible since provide us.	fees and requirements are	e based on the information ye	ou
Type of Event O Festival O Walk or	Run O Parade/March	Staging	specify)	
Event Name & Location Event Title Park (list all sites being requested)	e Night 8	intra d EW	S	
Event Times Set-Up Days/Dates OCT 12, Complete only if set-up day is separate from even	oフリ Fron t day)	n am / p	m toam/p	m
Event Days/Dates OCT 12, 202 (Include "day-of" setup and breakdown times)	Event	am / pm to am / pm to am / pm to	am / pm	
Breakdown Day OCT 12, 202	From	nam/p	om toam/p	m
(Complete only if breakdown day is separate from DESCRIPTION OF EVENT	event day)			. :
First time event (include site map with appliance that this description will be published	d in our City Parks &	ng event (include site m Recreation Public Sp	ecial Events Calendar:	
OCT 12, 2024 Fundrasieu for F	ELVIS 4	FRANKSI	NATRATR	LBUTE
fundrasieu for F	Book mok	ilo		

Anticipated # of event participants per day (people directly participating in event, event vendors/staff/volunteers)
Anticipated # of event attendees/spectators per day (people attending event):
ELEMENTS OF YOUR EVENT Setting up a stage? O Concert style dimensions
O Platform style, dimensions O Concert style, dimensions O No stage at event
Setting up tables, chairs, canopies and tents? O No tables being set up O Canopies: # and their dimensions O Tents: # and their dimensions O No tents being set up O No tents being set up
Having amplified sound and/or music? O Amplified sound for announcements only Amplified sound for music (check one) © CD player/DJ music O Small 4 – 5 piece live band O Large 6+ piece live band
O Large 6+ piece live band O Other O No amplified sound/music at event
Using utilities? O Gas
Having food and non-alcoholic beverages at your event? O Vendors preparing food on-site (don't include pre-packaged food/beverage vendors) # O Vendors bringing in pre-packaged food and beverages (don't include prepared food vendors counted above) # O All food and non-alcoholic beverages handled by organization; bringing in no outside vendors # O No food at event Having alcohol at your event? Yes, serving/selling beer and wine (complete Alcohol Request Form) Hours of alcohol being served: From
O No alcohol at event
Having selling and/or informational vendors at your event? O Vendors selling food only #O Vendors selling merchandise/services only #O Vendors passing out information only (no business license needed) #O No selling or informational vendors at event
Having kid activities? O Inflatable Bounce Houses # Company: O Inflatable Bounce Slides # Company:

O Rock climbing wall Height? Company: Truck to bring wall in? O Yes O No Truck acts as counterweight to wall? O Yes O No						
	o wall? O Yes O No					
O Arts & crafts (i.e. craft making, face painting, etc.)						
O Petting zoo? Company: O Carnival games or rides? Specify type	Company:					
O Other						
O Other No kid activities at event						
Any additional elements unique to your event but not asked above? O Yes. Describe:						
™ No						
WASTE MANAGEMENT						
O Contracting with trash/recycling vendor.						
Company						
Drop of Day & Time						
Pick Up Day & Time						
O Containers to be serviced Day & Time						
O Contracting with portable toilet & hand washing station vendor.						
Company						
Drop of Day & Time						
Pick Up Day & Time						
O Portable toilets to be serviced Day & Time						
MISCELLANEOUS Please list anything important about your event not already asked or	n this application:					
-For Office Use Only-	·					
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Contract #:	Reservation taker	ı by:	Reservation Fee Paid (Y ()N
Balance Paid	Key #:	Key Returned:	Deposit Returned:	
Supervisor Approval:	Parks & Recreation	on Commission Month:		