



NEAL S. BLAISDELL CENTER & WAIKIKI SHELL
Application for Use of Facilities

I. Applicant:

Contact Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

II. Status of Applicant:

- Corporation LLC Non-Profit Organization
 Individual Sole Proprietor Other _____

III. Proposed Date(s) of Facility Use:

Move In Date(s)/Time: _____

Event Day(s)/Time: _____

Move Out Date(s)/Time: _____

IV. Event Name: _____

V. Description of Event:

VI. Type of Event:

- Concert/Theatrical Trade Show
 Consumer Show - open to public Meeting/Seminar/Training
 Banquet Other: _____

VII. Admission Type:

- Paid Admission Free Public Private

VIII. Facility you wish to use (check one or more):

- Arena Concert Hall Waikiki Shell Exhibition Hall
 Pikake Room Hawaii Suite(s) Maui Room Oahu Room

IX. Expected Number of Attendees: _____

X. Additional Information:

Please note this is an application to do business with the Blaisdell Center and City & County of Honolulu. It is understood that by completing this application there is only expressed interest in our facilities and only when a rental application is executed is the interest mutual.

SIGNATURE: _____ **DATE:** _____
