

ATTACHMENT "B"
MARINA VILLAGE EVENT DETAILS FORM

Client is required to fill out & send in this form no later than 30 days prior to their event.

CLIENT NAME: _____

DATE OF EVENT: _____

ROOM (AND/OR) LAWN: _____

5 HOUR EVENT TIME: _____

CEREMONY START TIME (IF APPLICABLE): _____

WILL YOU BE EXTENDING YOUR PARTY BEYOND FIVE HOURS? Y [] N []
(OPTIONAL, BUT NOT TO EXCEED MIDNIGHT) HOW MANY (2 MAX.)? _____

VENDORS: SEE ATTACHMENT "C"

(Have you submitted a copy of the Liability Insurance for each of your vendors? If you have, thank you! If you haven't, please do so!)

MARINA VILLAGE SHOULD MAKE DAMAGE DEPOSIT CHECK PAYABLE TO:

NAME: _____

ADDRESS: _____

CLIENT SIGNATURE: _____ DATE: _____

MARINA VILLAGE STAFF SIGNATURE: _____

You may send this form via mail to: **MARINA VILLAGE**
1936 Quivira Way
San Diego, CA 92109

You may send this form via fax to: **619-222-0634**

Please call ahead if you will be sending this via email. 619-222-1620