

LOS ANGELES MEMORIAL
COLISEUM

EVENT INQUIRY FORM

CONTRACT INFORMATION

Contact Name:

Title:

Company Name:

Employer Identification Number:

Profit or Non-Profit:

Address:

Phone Numbers:

Email:

EVENT INFO

Name of Event:

Event Start Time:

Event End Time:

Preferred Event Date:

Alternate Date:

Event Website:

Type of Event:

This Info Must Be Completed For An Estimate. To Schedule a Walk Through, Please Contact an Event Manager.

EVENT INFORMATION

Would you like to purchase pre-paid parking? If checked, how many spaces?

**Please note this purchase is non-refundable after actuals.*

Scope of Event (Please provide a brief overview of your proposed event):

Additional Information/ Special Requests:

| | |
|-----------------------|------------------------|
| Load In Date: | Load In Times: |
| Load Out Date: | Load Out Times: |
| Expected Attendance: | |
| Will Tickets be Sold: | Proposed Ticket Price: |

| Area/Areas Requested: | | | |
|--|--|--|--|
| <input type="checkbox"/> Entire Coliseum | <input type="checkbox"/> Locker Rooms | <input type="checkbox"/> Field | |
| <input type="checkbox"/> Tunnel | <input type="checkbox"/> Concourse Level | <input type="checkbox"/> Seating Sections | <input type="checkbox"/> 1923 Club – L7 |
| <input type="checkbox"/> Press Box – L6 | <input type="checkbox"/> Conference Room – L5 | <input type="checkbox"/> Rod's Tiger Lounge – L5 | <input type="checkbox"/> Suites – L5 |
| <input type="checkbox"/> Lou Galen Club – L4 | <input type="checkbox"/> Founder's Suites – L3 | <input type="checkbox"/> Founder's Lounge – L2 | <input type="checkbox"/> Founder's Suites – L3 |
| <input type="checkbox"/> Founder's Suites – L2 | <input type="checkbox"/> President's Suite (201) | <input type="checkbox"/> Broadcast Compound | <input type="checkbox"/> South Office |
| <input type="checkbox"/> Peristyle | <input type="checkbox"/> Olympic Plaza | <input type="checkbox"/> North Office | <input type="checkbox"/> Game Mgmt Trailer |

| | | | | |
|-------------------|----------------------------------|-------------------|---------------|---------------|
| OPERATIONS | Audio/Visual | | | |
| | Audio required? | Video required? | | |
| | AV vendor? | Network required? | | |
| | Stadium videoboard use required? | | | |
| | Operations and Equipment | | | |
| | Tables: | 8ft: | 6ft: | Rounds: |
| | Chairs: | Staging: | Pipe & Drape: | Golf Carts: |
| | Bike Racks: | Tents: | Fork Lifts: | Pallet Jacks: |
| | Rentals Vendor? | Linens Needed? | | |
| | Field | | | |
| | Field Lights: | Start Time: | End Time: | |
| | Field Paint required? | Field Artwork? | | |
| | Olympic Cauldron: | Start Time: | End Time: | |

| | | | | | |
|-----------------|-------------------------------------|------------|-------------------|----------------------|--------|
| CATERING | Food: | | | | |
| | Breakfast | | Lunch | | Dinner |
| | Snacks | | Dessert | | |
| | Service: | | | | |
| | Start Time: | | End Time: | | |
| | Plated | Buffet | Passed Appetizers | Stationed Appetizers | |
| | Action Stations | | Concessions | | |
| | Beverage Service: | | | | |
| | Cash Bar | Hosted Bar | Non-Alcoholic | Coffee/Tea | |
| | Other: | | | | |
| | Additional Information: | | | | |
| | Allergens and Dietary Restrictions: | | | | |
| | Linen Rentals: | | | | |
| | Florals: | | | | |

If you are interested in being a part of our email list, please provide us with your email:

| | |
|--|--|
| | |
|--|--|

Once you have completed the form, please save and email to **Andrea Barrera at adbarrer@usc.edu**.
 For additional questions or information, please contact Andrea at **(213) 765-6344 or email adbarrer@usc.edu**



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