



**INTERNATIONAL AEROMODELING CENTER
EVENT REGISTRATION FORM**

Name of Event _____

Event Hours _____

1st & 2nd Date Choices _____

Setup date _____

of Participants _____

Site Requested
(reference site map) 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___

EVENT CONTACT

Name _____

Address _____

City, ST, Zip _____

Phone _____

Email _____

**Special Notes: EMS is required for events with over 100 participants;
Fee is \$75 per day**

***All vendors (merchandise & food) must be self sufficient, including
supplying their own power and tents.**

Equipment Request _____
(deposit may be required)

Specify equipment needed _____

Golf Cart Rental Yes ___ No ___ # Needed ___
(if available; damage deposit and rental fees apply)

Special Requests

Food Vendor* _____

Banquet Info _____

Meeting Room _____

Contest Director info if different than Event Contact

Name _____

Phone _____

Email _____

Once you have received approval to use the site, you will need to apply for a sanction for your event through the normal sanctioning process.