

BOISE STATE UNIVERSITY
TACO BELL ARENA LICENSEE INFORMATION FORM

All applicants must fill out this form in its entirety. Incomplete forms will not be reviewed.

Organization: _____

___ CORPORATION ___ INDIVIDUAL ___ GOVERNMENT ___ NON-PROFIT

Applicant Name: _____

Address: _____ City/State/Zip: _____

Phone (____) _____ Fax (____) _____ E-mail Address: _____

Person/s Authorized to Sign Contract:

Name: _____ Phone (____) _____

Name: _____ Phone (____) _____

BANK REFERENCE

Account Name/Number: _____

Bank/Branch: _____ Phone (____) _____

FACILITY REFERENCES

Please list auditoriums, arenas, and/or halls that have been previously leased by applicant

Venue	Artist/Performance/Show	Date	Venue Contact Name & Phone #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

BUSINESS REFERENCES

List two business references

Name: _____ Phone (____) _____

Name: _____ Phone (____) _____

EVENT INFORMATION

Event type (i.e. concert, sports, etc): _____ Artist: _____

Booking Agency: _____ Agent: _____ Phone (____) _____

Applicant hereby represents that he/she has made a full and complete disclosure of all information and that all of the statements and information are true and correct.

Signature of Applicant

Date

Please return by fax to: 208-426-1998 or email to danielsalamone@boisestate.edu.

Please note that completion of this form does not guarantee a hold or booking of the facility. Taco Bell Arena management reserves the right to deny licensing or vendor requests from individuals, organizations, or businesses that are considered in the opinion of the Arena to be fiscally or commercially impracticable.

UNIVERSITY USE ONLY: REVIEWED _____
DATE

TACO BELL ARENA EXECUTIVE DIRECTOR