| **Date of request:** |
| --- |
| **Local league contact name and title:** |
| **Local league contact email address:** |
| **Local League:**  |
| **Local League mailing address:**  |
| **Event description:** |
| **Event date and time:**  |
| **Event venue name and location:** |
| **Event venue contact name, e-mail, and telephone number:** |
| **Event venue contact mailing address:** |
| **LWVIL insurance coverage does not include liquor liability. If your event will include alcohol of any kind, the local League will need to pay for an additional 1-day liquor liability premium.** **Please respond to the following questions and contact** **treasurer@lwvil.org** **for further information on obtaining the proper coverage**. **Will alcohol of any kind be served at this event? Circle YES or NO** **If YES, enter the following information:****Approximately how many people will attend the event? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Who will supply the liquor? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Who will bartend/serve the liquor? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Will the bartenders/servers be BASSET certified or trained? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Additional comments or requests:** |