

**Kanawha Valley Arena
Information/Estimate Sheet**

Date: _____
Contractor: _____
E-Mail Address: _____
Event Date: _____
Start Time: _____ (am/pm) Finish Time: _____ (am/pm)

Location of Event: _____

Name of Event: _____
Event contact person: _____
Event Address: _____
Billing Address: _____
Phone Number: _____ Alternate Number _____

On-Site Event Representative

Name: _____
Phone Number: _____
Additional Information: _____

Estimated number of attendees: _____
Type of Event: _____

Total rental cost for event: _____

Total retainer amount due: _____

Remainder due on event date: _____

Kanawha Valley Arena Representative

Date

Signature

Date