

# San Diego Museum of Man

## Facility Usage Application

(To start the process please fill out this form and fax back to SDMOM)

### Applicant Information:

Name of applicant: \_\_\_\_\_  
(Organization or Individual)

Organization's primary function: \_\_\_\_\_  
(Type of business or activity)

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Fax: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_

### Event Information:

Type of Event: \_\_\_\_\_ Purpose of Event: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Number of Attendees: \_\_\_\_\_

Event Time: \_\_\_\_\_ Preferred set-up time: \_\_\_\_\_

### Event Details

Will food be served? Y / N If so, describe: \_\_\_\_\_

Will Alcohol be served? Y / N Host/No Host: \_\_\_\_\_

Will music be needed? Y / N If so, describe: \_\_\_\_\_

Will A/V be needed? Y / N If so, describe: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Please return to:  
Special Events Department  
San Diego Museum of Man  
1350 El Prado  
San Diego, CA 92101  
Fax: (619) 239-2749