



# EVENT FORM

We appreciate your interest in conducting an event or promotion with Smoothie King. We value all events; however, due to a high demand on our budget and on our event calendar, we cannot guarantee participation in every event. Coordination with the staff is crucial for a successful event. Please take a moment to provide us with the following information.

Today's Date: \_\_\_ / \_\_\_ / \_\_\_

## SPONSORING ORGANIZATION

Name \_\_\_\_\_  
Contact Person(s) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_ Best time to contact: AM PM

## EVENT INFORMATION

Name of Event \_\_\_\_\_  
Date & Time \_\_\_\_\_ Location \_\_\_\_\_  
# of years annual event has taken place \_\_\_\_\_ Average Attendance \_\_\_\_\_  
Type of service requesting: \_\_\_\_\_  
Event Description \_\_\_\_\_  
How will this event be marketed? \_\_\_\_\_  
Please name any other charitable organizations that will benefit from this event: \_\_\_\_\_

## PLEASE RETURN THIS FORM FOR APPROVAL

At least 30 days in advance to the event to:



599 Sam Ridley Pkwy, Smyrna, TN 37167  
Ph (615) 625-3982  
1970 Medical Ctrr Pkwy, Murfreesboro, TN 37129  
Ph (615) 396-8187  
2943 S Church St, Murfreesboro, TN 37127  
Ph (615) 956-6897  
Email: begood@smoothiekingrc.com