



ONTARIO
CONVENTION CENTER

EVENT INFORMATION FORM

Please return this form to your Event Manager to start the planning process.

2000 E. Convention Center Way, Ontario, CA 91764
909.937.3068 | FAX 909.937.3850 | servicedesk@ontariocc.org | www.ontariocc.org

Event planner name:		E-mail		Phone #1	
				Phone#2	
Preferred method of communication (Enter your email, phone or other):			Best time to contact:		Fax #
Onsite contact name:			E-mail		Phone #1
					Phone#2
Onsite contact authorized signer Yes No					
Mailing address:			City		State Zip
Event website:			Open to the public Yes No		Public phone #
Onsite registration: Yes No		Admission fee:		Age restrictions Yes No	
Box office required: Yes No		Box office hours for each day:			Advertised coupons: Yes No
Post as: (advertised name)					
Event synopsis:					
Set-up date/s and hours:					
Active date/s and hours:					
Closing hours for the building for each day:					
Break times for each day:				Food and beverage required: Yes No	
Estimated attendance for each day:					
Vendors/Exhibitors: Yes No		Number of Vendors/Exhibitors:		Will they pay for their own services: Yes No (electrical, internet, ETC...)	
Decorator name:			Contact name:		Phone #
Audio Visual equipment:				Would you like a quote: Yes No	
Internet/Telecom request: (Discount rate if received & paid 21 days prior)					
Electrical request: (Discount rate if received & paid 21 days prior)					
Attendees pay for own parking Yes No			Would you like to host any parking Yes No		Buses expected: Yes No
Hotel required: Yes No		Number of rooms:		Number of nights :	
				Interested in receiving additional entertainment information: Yes No	
Room set-up: Theater Classroom Banquet			Stage: Yes No		# of People on stage: Other:
Special needs:					
Additional event information:					