EVENTS REQUEST FORM

Date of Application: __________ / __________ / 20__

Event Date: __________ / __________ / 20__

Select your preferred reservation area and/or package.

RESERVATION AREAS: □ NSLM Showroom □ Garden Pathway □ NSLM Parking

PACKAGES: □ The Dugout □ Just Play Ball package

What is your preferred event time frame? ________ A.M. ________ P.M. ________ A.M. ________ P.M.

Does your event require more than the standard set-up and/or breakdown time? □ Yes □ No

If yes, please indicate your preferred set-up and breakdown time frame. ________ A.M. ________ P.M. ________ A.M. ________ P.M.

What type of event are you hosting at the museum?

☐ Mixer      ☐ Meeting      ☐ Family Reunion      ☐ Birthday Party

☐ Wedding      ☐ Rehearsal Dinner      ☐ Ceremony      ☐ Reception

Other: (Please specify) ____________________________________________________________

Is your event: ☐ Public   ☐ Private   What is your anticipated guest count? ___________________

Please list and provide the contact information for each caterer/vendor who will be assisting you with your event.

☐ Caterer      ☐ Vendor   Company Name: ______________________________

Primary contact: __________________________________ Telephone Number: (____) ________

Email Address: _____________________________________________________________

Services to be provided: _______________________________________________________

☐ Caterer      ☐ Vendor   Company Name: ______________________________

Primary contact: __________________________________ Telephone Number: (____) ________

Email Address: _____________________________________________________________

Services to be provided: _______________________________________________________

☐ Caterer      ☐ Vendor   Company Name: ______________________________

Primary contact: __________________________________ Telephone Number: (____) ________

Email Address: _____________________________________________________________

Services to be provided: _______________________________________________________
EVENTS REQUEST FORM

Primary contact/Event coordinator: ________________________________
Primary phone number: _________________________________________
Email address: ________________________________________________
Mailing address: ______________________________________________

Sponsoring organization or Individual: _____________________________
Phone number: ________________________________________________
Email address: ________________________________________________
Mailing address: ______________________________________________

Is the sponsoring organization a non-profit organization? (Check One) □Yes   □No
If yes, please remit a copy of your organization’s 501c3 form. Thank you!

FOR INTERNAL USE ONLY

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NEGRO SOUTHERN LEAGUE MUSEUM
BIRMINGHAM

120 - 16th Street South  /  Birmingham, Alabama 35233  /  (205) 581-3040  /  www.birminghamnslm.org
Safety:
In the case of a medical emergency during your visit, a staff member will call 911 from a landline phone and follow the instructions of the dispatcher. In case of an emergency evacuation, all visitors will exit the museum, using the nearest set of exit doors, and convene in the museum’s parking lot located directly beside the museum underneath the Venue at the Ballpark. If the parking lot is unavailable, guests will meet in the museum’s alternative location, which is Railroad Park, 16th Street entrance.

While at the Museum no visitor shall:

- Solicit for commercial or charitable purposes or distribute advertisements, pamphlets, handbills, and flyers
- Smoke on the premises
- Display or carry placards, signs, or banners
- Destroy, damage or remove property
- Use loud, abusive or otherwise improper language
- Run or participate in excessive horseplay
- Engage in disorderly conduct
- Use, possess or sell illegal drugs
- Loiter, sleep or participate in unwarranted assemblies
- Bring dogs or other animals, other than service animals

Americans with Disabilities Act (ADA)
The Negro Southern League Museum does not discriminate on the basis of disability in access to programs, services, activities or any practices mandated by the Americans with Disabilities Act of 1990. Every effort will be made to provide reasonable accommodations when requested. Some requests may require advance notice depending upon the request.