



**Application for Use of the James T. Emerson Education and Conference Center  
At the Olde Dominion Agricultural Complex**

Name of Applicant – \_\_\_\_\_

Address of Applicant – \_\_\_\_\_

Event Manager (Contact Person) – \_\_\_\_\_

Telephone \_\_\_\_\_ (email): \_\_\_\_\_

Date (s) Requested: 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_  
Times Requested \_\_\_\_\_

Please provide a description of the event and the general activities and entertainment which will occur:

\_\_\_\_\_

All applicants will be provided the rules and regulations for events at the Olde Dominion Agricultural Complex. All applicants are expected to follow and abide by the rules and regulations set forth in these documents.

Please complete this Application thoroughly. Return this Application for Use to the Olde Dominion Agricultural Foundation at the following address or via email at [olddominionagfound@gmail.com](mailto:olddominionagfound@gmail.com) or **Olde Dominion Agricultural Foundation, 19783 US Highway 29, Suite G, Chatham, Virginia, 24531.**

**AFTER THE APPLICATION IS APPROVED, THE DEPOSIT MUST BE PAID WITHIN 7 DAYS OF NOTIFICATION OR THE DATE WILL BE FORFEITED.**

**The Olde Dominion Agricultural Foundation strongly recommends** that all Applicants using the conference center obtain **liability insurance coverage** with limits of no less than \$1,000,000.00 for property damage and injury or death for any one person and \$1,000,000.00 for property damage and injury or death for the event. **This insurance is required to lease the arena and barns.** When obtained, the **Applicant shall provide Olde Dominion Agricultural Complex with a Certificate of Insurance for such insurance which shall show Olde Dominion Agricultural Complex as additional insured and which provides that rights of subrogation against Olde Dominion Agricultural Complex shall be waived.**

**The Certificate must be provided to the Facilities Director 1 week prior to the event date.**



Expected size of audience: \_\_\_\_\_  
Will tickets be sold for admission? \_\_\_\_\_ Ticket fee charged \_\_\_\_\_  
Will vendor fees be charged? \_\_\_\_\_ Vendor fee charged \_\_\_\_\_  
Number of tables needed \_\_\_\_\_ Number of chairs needed \_\_\_\_\_  
DJ or Band on site \_\_\_\_\_

*Pittsylvania County requires a music festival permit for events playing music over 6 hours. Contact Pittsylvania County for more information.*

Caterer or food vendor to be used \_\_\_\_\_

*All caterers must contact Pittsylvania County Commissioner of Revenue 434-432-7940 and Health Department 1-866-434-7232 and inform of intent to serve food at ODAC.*

Podium needed \_\_\_\_\_ A/V Equipment \_\_\_\_\_ Wireless mic \_\_\_\_\_

Internet WIFI connectivity \_\_\_\_\_

Security \_\_\_\_\_ ***The Olde Dominion Agricultural Foundation may require an applicant have an officer on site during the event at the applicant's expense for any reason deemed necessary by the Foundation***

EMS (Rescue Squad) \_\_\_\_\_ Fire Department \_\_\_\_\_ Special Requirements \_\_\_\_\_

**Will there be the consumption of alcohol during the event? Yes  No**

(If yes, the Applicant must obtain an ABC permit from the Virginia Department of ABC [www.abc.virginia.gov/licenses/get-a-licenseonline](http://www.abc.virginia.gov/licenses/get-a-licenseonline) or in the Lynchburg office. The permit must be provided to the Facilities Director within seven (7) days prior to the event).

**Alcoholic beverages must be confined to the area rented. Alcohol is not permitted to be consumed on the grounds or in the parking lot. This could be considered drinking in public by local law enforcement.** Alcohol cannot be sold or tickets sold to events with alcohol due to ABC rules. Contact Virginia Department of ABC for more information.

**APPLICANT IS RESPONSIBLE FOR ANY AND ALL COSTS RELATING TO THE EVENT.**

**Once received by the Olde Dominion Agricultural Foundation, the application will be reviewed and approved or denied within 7 business days. AFTER THE APPLICATION IS APPROVED, THE DEPOSIT MUST BE PAID WITHIN 7 DAYS OF NOTIFICATION OR THE DATE WILL BE FORFEITED.**

**I hereby declare that all information stated in this application is true and accurate.**

Signed \_\_\_\_\_

Date \_\_\_\_\_