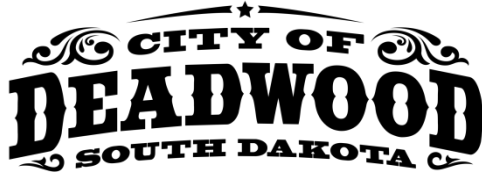# Event Complex Rental and Use Agreement

Event: PBR: Unleash the Beast Series

Date: Sept 25/26, 2021

The City of Deadwood has contracted with the Deadwood Chamber of Commerce and Visitors Bureau for the management and coordination of the Deadwood Event Complex. As an applicant for rental and use of any portion of the Deadwood Event Complex, you are required to contact the Chamber for coordination and assistance in the submittal of this application to the City. The Chamber can be contacted at the following address:

> Deadwood Chamber of Commerce
> 767 Main Street
> Deadwood, SD 57732
> 605-578-1876

Deadwood Event Complex Rental and Use Agreement

Event Name: Professional Bull Riders

Contact Information:

Name of Applicant: _____

Business/Organization: Professional Bull Riders, LLC

Mailing Address: 101 W Riverwalk_____

City, State Zip: Pueblo, CO 81003 _____

Business Phone:719-242-2800 _____   Cell Phone:_____

Email Address: Rseddon@PBR.com _____

Dates Event Complex requested:

Set up Date(s): Thursday/Friday – Sept 23-24 _____   Hour(s): 7a-10p _____

Event Date(s): Sat/Sun – Sept 25-26_____   Hour(s): 4p-10p & 1p-5p _____

Clean-up Date(s): Monday – Sept 27_____   Hour(s): _____

Approximate number of people who will attend: 4,000 each performance dat

I am applying to use the: *(Please check property requested)*		Office use Only
☒ Ticket Booth		Key #
☒ Main Grandstand Concession		Key #
☒ Crow's Nest		Key #
☒ Main Grandstand Restrooms		Key #
☒ VIP Grandstand		Key #
❑ Baseball Field(s)		Key #
❑ Baseball Field Restrooms		Key #
☒ Arena and Corral Areas		
☒ Venue Seating		
☒ Parking Lots		

Deadwood Event Complex Rental and Use Agreement

Event Name: Professional Bull Riders: Unleash The Beast Series _____

Compliance with Deadwood City Ordinances:

Please review the City of Deadwood Ordinances located on the City of Deadwood website: www.cityofdeadwood.com or by calling (605) 578-2082.

1) Deadwood Codified Ordinance - Chapter 8.12 – Noise. This ordinance must be adhered to. A violation of this ordinance could be grounds for refusing future rental requests.

2) Deadwood Codified Ordinance – Title 5 – Business License. This ordinance may apply.

Additional contacts:

Names & contact number of event representatives or sub-contractors (i.e. security, refuge, etc.):

Name : Badlands Security _____   Title: _____

Phone:_____   Representing: Security _____

Name: Cowboys of Belle Fourche Shriners_____   Title: _____

Phone:_____   Representing: Grandstand Janitorial __

Name: Lead Deadwood Ambulance Service _____   Title: _____

Phone:_____   Representing: Medical / EMTs _____

Name: Dr. Rett _____   Title: _____

Phone:_____   Representing: Veterinarian _____

Name: _____   Title: _____

Phone:_____   Representing: _____

Name: _____   Title: _____

Phone:_____   Representing: _____

Deadwood Event Complex Rental and Use Agreement

Renter Type: ☒ For-Profit ❑ Private ❑ Non-Profit ❑ Government
(Check One) *Categories above defined in the Complex Guidelines and Information Sheet*

Rental Fees:

	Event Complex Facilities	Parking Lots	Baseball Fields
Private	$35 / Hr.	$25 / Hr.	$25 / Hr.
	$300 / Day	$200 / Day	$100 / Day
Non Profit	$30 / Hr.	$25 / Hr.	No charge
	$250 / Day	$150 / Day	No charge
For Profit	$75 / Hr.	$65 / Hr.	$35 / Hr.
	$500 / Day	$500 / Day	$300 / Day
Government Agencies	No charge	No charge	No charge

Rental Fees subject to change.
Damage Deposit (Refundable): $500 minimum (no alcohol) or $1,000 minimum(serving alcohol)
Key Deposit (One Key or All Keys)(Refundable): $100.00

Please read the Use Guidelines for cancellation and reservation policies.

Fees   **Refundable Deposits**

Event Complex Facilities $2,500 ___   Key Deposit $100 _____

Parking Lots $2,500 ___   Cleaning/Damage Deposit $1,000 _____

Baseball Fields $_____

Total Fees $5,000 ___   **Total Deposits**   **$1,100** ____

Please write separate checks to the City of Deadwood *(one check for event and one check for deposits)*

Organization:_____

Name: _____ Title: _____

Signature: _____ Date: _____

For Office Use Only:

Date Fees Received: _____ Total(s):_____

City Representative: _____ Title: _____

Signature: _____ Date: _____