Nashville Superspeedway Rental Request Form

Thank you for your interest in Nashville Superspeedway (NSS). We would love to hear more about your event. Please complete the following information to request the use of Nashville Superspeedway (NSS) property for your upcoming event. Your request will be reviewed by NSS staff and you will be notified regarding availability and next steps.

TODAY'S DATE	
NAME OF EVENT	

COMPANY/GROUP ORGANIZING EVENT (LESSEE)	

CONTACT PERSON	
CONTACT EMAIL	

CONTACT PHONE #s	OFFICE	
	CELL	

EVENT DATE (S) REQUEST *(list entire timeframe-include set-up/event days/tear-down)*		
[please list min of two date options]	START DATE	END DATE
1ST CHOICE		
2ND CHOICE		
3RD CHOICE		

MAILING ADDRESS	STREET	
	CITY	
	STATE	
	ZIP	
TYPE OF INSURANCE DO YOU CARR		

DOES THE EVENT HAVE ANY SPONSORS (LIST POTENTIAL AS WELL)	
COMPANY NAME	PRODUCT TYPE
NSS must approve all sponsors that will be displayed on-site & in any advertising materials	

BRIEF DESCRIPTION/PURPOSE OF USE:	

WILL THE EVENT BE ADVERTISED? IF YES, HOW? NSS MUST VIEW/ APPROVED ANY USAGE OF TRACK'S NAME & LOGOS		
TELEVISED? (YES OR NO)		

EVENT BREAKDOWN BY DAY (PLEASE COMPLETE THE BELOW FOR EACH DAY, INCLUDE ALL DAYS (SET-UP/EVENT/TEAR-DOWN), PLACE N/A IF ANY AREAS DO NOT APPLY FOR THAT DAY) - **SEE PAGE 2 IF YOU NEED ADDITIONAL SPACE

DATE	TYPE OF DAY (EX. SET-UP DAY, EVENT DAY, TEAR-DOWN DAY)	TYPE OF ACTIVITY (EX. TESTING, CAR CLUB, RIDE & DRIVE, DRIFTING, STAFF TRAINING, RACING EXPERIENCE, ETC.) - IF ANY ACTIVITIES INCLUDE COMPETITION(C) PLEASE LIST AS [ACTIVITY NAME/C]	PROPOSED AREA (EX. OVAL, ROAD COURSE, PADDOCK, MEDIA CENTER, ETC.)	START TIME	END TIME	EXPECTED ATTENDANCE #	INVITEES (EX. MEDIA, CAR ENTHUSIAST, GENERAL PUBLIC,	TICKETS SOLD (IF YES PLEASE INCLUDE ADMISSION PRICE)

ADDITIONAL AREAS TO BE USED DURING YOUR EVENT AT NSS (EX. PARKING | AREA OUTSIDE INFIELD	
TYPE OF ACTIVITY	PROPOSED AREA

FOOD & BEVERAGE		
ALCOHOL SERVED (IF YES, PLEASE LIST ALL TYPES: BEER, WINE, LIQUOR, ETC.)		
FOOD NEEDED (√ PLEASE CHECK ALL THOSE THAT WOULD APPLY)		CONCESSION STAND
		FOOD TRUCKS
		CATERING
		OTHER
NSS WILL DISCUSS ANY RESTRICTIONS REGARDING F&B/EXCLUSIVE VENDORS		

STAFF SCHEDULE (PLEASE LIST OUT EACH DAY & THE HOURS STAFF WILL BE ON-SITE (INCLUDE ALL DAYS (SET-UP/EVENT/TEAR-DOWN) **SEE PAGE 2 IF YOU NEED ADDITIONAL SPACE			
DATE	START TIME	END TIME	HOW MANY STAFF

PROPOSED SERVICES/EQUIPMENT NEEDED TO BE QUOTED/PROVIDED BY TRACK (EX. PARKING ATTENDANTS, SIGNAGE, CONES, SECURITY, ETC.)	
SERVICE/EQUIP TYPE	PURPOSE
NSS WILL CONFIRM IF PROPOSED SERVICES/EQUIP CAN BE PROVIDED BY TRACK	

PROPOSED SERVICES/EQUIPMENT PROVIDED BY LESSEE	
SERVICE/EQUIP TYPE	PURPOSE
NSS WILL DISCUSS ANY RESTRICTIONS REGARDING EXCLUSIVE VENDORS	

ADDITIONAL INFO: ANY ADDITIOANL INFORMATION YOU WOULD LIKE TO TELL US ABOUT YOUR EVENT?

**ADDITIOANL SPACE IF NEEDED (TO CONTINUE FROM PAGE 1)

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INTERNAL USE NOTES: