

Wedding Event Parking Request

Please submit requests *a minimum of two weeks prior* to your event.
(Requests are approved based on available space.)

Boise State University
1910 University Drive
Boise, ID 83725-1290

208-426-PARK (7275)
208-426-3343 FAX

E-mail Questions: prkevtreq@boisestate.edu

Department of Parking & Transportation Services

Parking • Transportation

Building Location: 1001 Lincoln Avenue

Today's Date: _____

Bride's Name: _____ Groom's Name: _____

Rehearsal Date & Time if applicable: _____

Wedding Date & Time: _____

Contact Person Name, phone, email: _____

Billing Address: _____

Additional needs or considerations: _____

Lot rental Prices: \$25 for 20 spaces \$50 for 20+ spaces (up to 100 spaces)

Extras:

Equipment: \$35 includes signs for event, and blocking small area off with cones.

Staffing: \$25.60 for a supervisor- (1st hour mandatory); \$10.48 per attendant, per hour.

Shuttles: 15 passenger shuttles, ADA accessible; \$45 per hour, per shuttle, includes the cost of a driver.

***For a wedding with events going on at the TBA or Stadium, the maximum cost would be \$150 for parking, including parking attendants, equipment usage, and lot rental fees. This would include blocking off all wedding spaces that have been reserved.**

Staffing: Yes No Expected # of Vehicles/Permits: _____

Confirmation Requested: Yes No Confirmation by: Phone E-mail

Payment Options: Check/Cash Credit Card – Visa MasterCard Discover – Please Circle one

_____ - _____ - _____ - _____ Exp ____/____

By my signature I understand that I will *give notice of cancellation a minimum of 7 days prior* to Event listed above or I will be charged the full amount.

(Required)

Signature: _____

For Office Use Only

Date Received: _____

Date Posted/Confirmed: _____

Lots Reserved: East Cesar Chavez Lane & East Stadium General Closest to Chapel

Traffic Control Arrangements: Staff \$ _____ Supervisor(s) \$ _____ Labor Cost: \$ _____

Signs: \$ _____ Permits: \$ _____ Shuttle \$ _____ Equipment Cost: \$ _____

Total Cost: \$ _____

Invoice Date: _____

Invoice #: _____

Date Paid: _____

Date Permits Mailed _____