



Bid Application

Name of Event: _____

Event Date: _____

Submitted to

USA Table Tennis
One Olympic Plaza
Colorado Springs, CO 80909
Phone: 719-866-4583
Fax: 719-632-6071
www.usatt.org

This application must be accompanied by the following:

1. Letter of intent, signed by the facility administrator, confirming availability of venue on proposed dates.
2. Venue floor plan indicating length, width, depth, markings, encumbrances, and dimensions of usable floor space.
3. Letters of support from community/government officials and supporting organizations.

Host Information

Host Organization/Local Organizing Committee

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Tournament Chairman

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Experience in Hosting Major Sporting Events: _____

Tournament Director

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Table Tennis or Related Experience: _____

Experience

Please list any major table tennis competitions you have hosted in your city in the past four years.

1. Event:: _____ Date: _____

Facility : _____ Attendance: _____

2. Event:: _____ Date: _____

Facility : _____ Attendance: _____

3. Event:: _____ Date: _____

Facility : _____ Attendance: _____

Sponsorship

Please list possible sponsors who have shown an interest in this event:

Organization: _____

Contact: _____

Organization: _____

Contact: _____

Organization: _____

Contact: _____

Organization: _____

Contact: _____

Competition Venue
(Please Submit Floor Plan)

Name of Facility: _____

Contact Person: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Square Footage: _____

Is Facility Air Conditioned: _____
(Air Flow centimeter per second)

Flooring (wood, concrete, etc.): _____

Type of Lighting: _____

No. of Footcandles: _____

Distance from Airport: _____

Please list any existing commercial signage in the facility that cannot be covered:

Advertiser: _____ Size of Sign: _____ Location of Sign: _____

Advertiser: _____ Size of Sign: _____ Location of Sign: _____

Adjacent Facilities

Check if available.

- Restrooms - Number _____
- Meeting Rooms - Number _____
- Trainer/Medical Room
- Concessions Area (food, T-shirts, etc.)
- Hospitality Room (to provide meals for officials and staff)
- Press/Media Room (for athlete interviews, etc.)
- Phones Available - Number _____
- Free Parking
- Registration Area
- Locked Storage Rooms - Number _____

Equipment

Check if available. Indicate type where appropriate.

- Computer with Printer
- Typewriter
- Copier
- Public Address System
- Amplifier
- Overhead Speakers - Number _____

Furniture

_____ Bleacher Accommodations For _____ People

_____ Easels

_____ Portable Bulletin Boards

Staging:

_____ Pipe and Drape

_____ Background Draping 12' High

_____ Carpeting

_____ Signage Area - Indicate Size and Location

Accommodations

Hotel

Name: _____

Address: _____

City/State/Zip: _____

Contact Name: _____

Phone: _____ Fax: _____ Email: _____

Hotel Capacity: _____

Please attach hotel proposal(s). Make sure all bid specifications are addressed.

For each hotel bid submitted, please complete the following:

Distance from Venue: _____

Shuttle Service to/from Venue: _____

Distance from Airport: _____

Shuttle Service to/from Airport: _____

Distance from Nearest Major Retail Center: _____

Fitness Center on Property: yes _____ no _____

Whirlpool/Sauna yes _____ no _____

Swimming Pool yes _____ no _____

Hotel Restaurants - Number _____ (Average Hours _____)

Transportation

Name of nearest airport: _____

Courtesy Pick-up from airport to hotel: yes _____ no _____

List Airlines which service the area: _____

Support Services

Sources of Support Volunteer Staff

Volunteer sources: _____

Contact Person: _____

Address: _____

City/State/Zip: _____

Contact Name: _____

Phone: _____ Fax: _____ Email: _____

List experience of this table tennis organization in hosting local, regional, and/or national tournaments: _____

Venue Support

Can LOC provide all volunteers needed to support the running of events bid for?
yes _____ no _____

Application Prepared By:

Name/Title

Signature

Submitted By:

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email: _____

Signature: _____

Date: _____