

hearing April 10, 2019

Apply for an Entertainment / Event/ Raffle/Class F Liquor Licenses

19-862

Applicant

Erica Tessier
401-585-2865
etessier_4700@email.ri.edu

Raffle
24099

Rhode Island College
Cooperative Preschool at
600 Mt Pleasant Ave
10:00AM - 1 PM

Entertainment License Application

Application License Type

One-Time/One Day Entertainment License (with or without Class F)

Is a Corporation (LLC or INC) applying for this entertainment license?

No

Are you applying for a Class F liquor licenses as part of your entertainment license?

No

April 13, 2019

Business Organization Information

Name of business, organization, or individual applying for event

Rhode Island College Cooperative Preschool

Principal Owner/Person responsible for the license

Carolyn Shields

Business Address

600 Mt Pleasant Ave Providence RI

Business Phone Number

4014568154

If the individual applying for the application is different from the principal owner or organizational leader, please explain why.

Erica Tessier - Coordinator

ENTERTAINMENT / EVENT

Start Time

10:00am

Name of event point of contact

Erica Tessier

Please provide the name of the promoter and social media usernames they will promote with if applicable.

End Time

1:00pm

Email of event point of contact

etessier_4700@email.ri.edu

If other/multiple is selected for security, please explain.

Please list range of dates if event is running more than one day.

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If your start/end time varies on different days of the event, please provide the breakdown of start and end time by date below.

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Live Band and/or Theatrical Performance

false

Address where event will be held, if different from business address on file.

600 Mt Pleasant Ave Providence RI

Raffle

true

What type of security detail will you have?

Private Security

Rain date, if applicable

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Indoor/Outdoor Events / Expansion of Premises

Will entertainment occur indoors, outdoors, or both?

Outdoor Only

Number of days event will require expansion of premises.

0

Raffles

Name of event

Rhode Island College Cooperative Preschool

Number of days event will run

1

Phone number of event point of contact

401-585-2865

DJ-

false

I will attach a list of entertainers on the following page (if applicable).

false

Adult Entertainment

false

Dancing-

false

Mobile Vendor

false

At any time during this event, will sound amplification be used?

No

First date of event

04/13/2019

Will a promoter be used?

No

Number of days the event will be outdoors

1

Will any of your events include raffles?

Yes

How many different raffles will you be holding?

1

Signature

I, the applicant, affirm that the facts contained herein are true and that any omission or nonfactual information could result in the denial of my license.

true

Please type the first and last name of the person filling out this application and attesting to the accuracy of all the information entered and agreed to above above.

Erica Tessier

BCI

Full Legal Name

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Date of birth

--

Full address (current)

--

Full Address (Former if at current address less than 3 years)

--

Phone number

--

Gender (fill in)

--

Have you ever been arrested?

--

Have you served in any branch of the US Military?

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Static Field

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Please type the first and last name of the person filling out this application and attesting to the accuracy of all the information entered and agreed to above.

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