



State Summer Games

Tent Form

Team _____

Coach _____

Email _____

Please check one:

My team will have a tent this year. Yes _____ No _____

*If you will not have a tent, please check "No" and email this form to Robin
Robin@specialolympicsri.org*

If you will have a tent, please check "yes" and complete the rest of the form.

My team will rent a tent this year. Yes _____ No _____

Tent Size _____

Rental Company _____

My team will bring a Pop-Up Tent. Yes _____ No _____

Number of Pop-Up Tents _____

Pop-Up Tent Size(s) _____

Fire retardancy information is not needed for pop-up tents on the URI Tent Application.

Please email the SORI Tent Form and URI Tent Application to Robin

Robin@specialolympicsri.org

UNIVERSITY OF RHODE ISLAND
OFFICE OF FIRE/LIFE SAFETY
TENT APPLICATION 874-7994

EVENT ADDRESS:			
FUNCTION:	TENT TO BE USED AT NIGHT: YES		NO
TENT ERECTED ON: _____, 20__	EVENT HELD ON: _____, 20__	TO _____	, 20__
# OF EXPECTED GUESTS: _____	# OF SEATS PROVIDED: _____		
WILL PORTABLE HEATERS BE USED? YES	NO	LISTING AGENCY: _____	

APPLICANT INFORMATION		
APPLICANT (THE RENTER OF THE TENT): _____		
PHONE NUMBER (HOME): _____	(BUSINESS): _____	(CELL): _____

TENT INFORMATION			
TENT OWNER (RENTAL COMPANY): _____			
ADDRESS: _____	CITY: _____	STATE: _____	ZIP CODE: _____
PHONE NUMBER (BUSINESS): _____	(FAX): _____	(OTHER): _____	
TENT MANUFACTURER: _____	SIZE OF TENT BEING ERECTED: _____		
DATE TENT WAS TREATED FOR FIRE RETARDENCY: _____ FIRE RETARDANT IS GOOD FOR ONLY 10 YEARS			
WILL THERE BE COOKING UNDER THE TENT?: YES	NO	WILL SIDES BE PROVIDED?: YES	NO
COPIES OF THE FIRE RETARDANT CERTIFICATE OR TENT OWNERS LETTER IS ATTACHED: YES	NO		
DETAILED FLOOR PLAN OF AREA UNDER TENT IS ATTACHED: YES	NO		

I, _____ (PRINT APPLICANT NAME) hereby certify that I have the authority to make this application, that the application is correct, and that I agree to conform to all applicable codes and ordinances.

(APPLICANT SIGNATURE) _____ (DATE)

OFFICIAL USE ONLY		
FIRE/LIFE SAFETY APPROVAL		
FIRE INSPECTOR: _____	RANK: _____	DATE: _____
KINGSTON FIRE DISTRICT APPROVAL		
FIRE DEPARTMENT: _____	RANK: _____	DATE: _____
_____	_____	_____