# Tripoli Rocketry Association

**LDRS Host Proposal Template**

*Please enter information for* ***all*** *blanks. Enter “N/A” or “none” where applicable. Attach any additional materials deemed necessary to help describe the proposal in more detail.*

LDRS #\_\_\_\_\_ Year \_\_\_\_\_\_\_ Host Organization(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principle contact(s) (list name, TRA #, address, phone, e-mail)

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Additional contact(s) (list name, TRA #, address, phone, e-mail, role/title)

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Launch venue \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site size/dimensions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Launch dates: Commercial\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Research\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAA Waiver Alt: Commercial\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Research\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Launch equipment - number and types of launch pads/locations, launch controller(s), rails/rods/towers, etc. Include a description of the number of launch locations available for all classes of motors/rockets to be flown at the event. Note any restrictions/limitations. Attach documents/graphics as needed

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Launch event personnel structure – list the number of personnel who will support the event, including descriptions of the duties they will perform. If multiple organizations will support the event, identify these personnel by their associated organization.

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Proposed launch site layout – ***attach*** diagram with dimensions, showing flying field area, spectator area, vendor area, obstacles, adjacencies, access road(s), etc. Note if and where on-site camping is permitted, and associated facilities/rules.

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Proposed fee structure: Flyer’s fee \_\_\_\_\_\_\_\_\_\_\_ Dinner fee \_\_\_\_\_\_\_\_\_ Other fees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fee structure notes:

* All fees that will be charged to participants, vendors, attendees, etc., must be disclosed as part of this bid. Attach additional listing if needed. No subsequent fees may be charged after the submission of this bid.
* Host organizations are strongly encouraged to keep fees charged to non-flyers, such as vendors or spectators, to a minimum or waive charging such fees altogether.

Lodging/accommodations – describe the principal hotel/motel to be used, available rooms, and pricing (if known). Also describe available alternative hotels/motels, camping, or other accommodations in the vicinity.

Note - the host organization must arrange the following facilities with the following general requirements:

* A meeting or conference room to accommodate TRA Board/TRA Member meetings from Noon to 11 PM the day before flying commences, and possibly additional days/evenings. Usual attendance is 50-100.
* A facility (at the hotel or other location of the hosts’ choice) to support an attendees’ dinner/member meeting, held on Saturday evening during the event window. This facility must also include audio/visual support for the TRA Annual Meeting
* Except for the meeting rooms, which will be paid by TRA, the Host will be expected to cover all costs associated with these requirements and will make the actual arrangements with the host hotel. Before making any scheduling arrangements for the meetings described above, the host organization must confirm dates and times with the TRA Board of Directors. Detailed meeting room requirements should also be confirmed with the TRA BoD.

Please describe any state or local requirements regarding impulse limits, vendor permits, or flyer licensing:

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Other information related to this proposal (use attachments if needed)

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Submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_