

DEPARTMENT OF LIQUOR CONTROL

COUNTY OF HAWAII

Hilo Lagoon Centre, 101 Aupuni St., Unit 230, Hilo, Hawaii, 96720 * Phone: (808) 961-8218 * Fax: (808) 961-8684

E-Mail: cohdlc@hawaiiicounty.gov

APPLICATION FOR MINOR ENTERTAINMENT PERMIT

Pursuant to Rules 3-2-D-8 of the Rules and Regulations of the Liquor Commission of the County of Hawaii, application is hereby made for a Minor Entertainment Permit.

Date of Function: _____ Time: _____

Kind of Performance: _____

Minors, ages 18 to 20 years old: (If large group, attach information)

Name: _____ Birthdate: _____ Address: _____

Name: _____ Birthdate: _____ Address: _____

Name: _____ Birthdate: _____ Address: _____

Minors, ages 17 years and under: (If large group attach information)

Name: _____ Birthdate: _____ Address: _____

Name: _____ Birthdate: _____ Address: _____

Name: _____ Birthdate: _____ Address: _____

The request for a minor entertainer, age 17 years or under, is made with my knowledge and consent. The minor will be under my direct supervision at all times while within the licensed premises and will be escorted to and from the premises by myself or an authorized adult .

Parent/Guardian: _____
(Signature)

Name: _____

Date: _____

Phone No.: _____

E-Mail: _____

CERTIFICATION BY LICENSEE

I certify that the information contained herein is true and correct and that I will be held responsible to ensure that minors do not commingle with patrons and that their participation and presence shall comply with the liquor laws.

Licensee: _____

dba: _____

By: _____
(Signature)

Name: _____

Title: _____

Date: _____

Phone No.: _____

E-Mail: _____

PERMIT

Your application for a Minor Entertainment is approved.

By: _____
Director

Date: _____