



FACILITIES AND FIELD USE APPLICATION

Customer Name \_\_\_\_\_ Phone \_\_\_\_\_

Event Day Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Facility Name \_\_\_\_\_

Event Type \_\_\_\_\_

No. of Attendees \_\_\_\_\_

Set up date \_\_\_\_\_ Set up time from \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Event date \_\_\_\_\_ Set up time from \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Clean up date \_\_\_\_\_ Set up time from \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

<b>For office use only:</b>	
Date of Application:	
Receipt No:	
Fee:	
Approved by:	
Copy of insurance received:	