Application for use of College Facilities  
By Community Organizations during College Breaks  
Today’s Date ________________________________

1. Name of the Organization ________________________________
2. Name of the Contact Person ________________________________
3. Contact email address ________________________________
4. Address of Organization ________________________________
   ______________________________________________________
5. Telephone No. ________________ Fax No. ________________

6. Requested date(s) of Use of College Facilities __________________
7. Anticipated participants ________________________________
8. Age of participants ________________________________
9. Logistical needs of the event ________________________________
10. Description of the activity ________________________________
11. Do you need catering? ________________________________
12. Do you have a certificate of insurance? __________________________
13. Is the event open to the community? ________________________________
14. Is your Organization non-for profit? ______ Please provide (5013C) __________________

_________________________________________   ________________________
Signature                                            Date

Applications must be submitted 6 weeks in advance of activity