

FACILITY REQUEST

Event Name : _____

Customer Information

Name _____

Company/Organization _____

Phone No. _____

Email _____

Address _____

Alternate/On-Site Contact _____

Phone No. _____

Single Date Bookings

	Date	Start Time	End Time
Set-up			
Event			
Take-down			

Multi-Date Bookings

Date Range _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start							
End							

Please check off required spaces below

Multi-Rec Centre	Charity Park	Sinclair Park
Fieldhouse (Full Surface)	Ball Diamond 1 Slow Pitch 1	Ball Diamond 1 Baseball
Fieldhouse (Front Half of Surface)	Ball Diamond 2 Slow Pitch 2	Ball Diamond 2 Baseball
Fieldhouse (Front Half of Surface)	Ball Diamond 3 Hardball	Ball Diamond 3 Baseball
Arena 1	Ball Diamond 4 Multi-Use	Ball Diamond 4 Baseball
Arena 2		Ball Diamond 5 T-Ball
Lobby	RMSS	Ball Diamond 6 T-Ball
Play-Centre	Soccer Field	Ball Diamond 7 T-Ball
Multi-Purpose Room		
Running Track		

Event Description

Anticipated Attendance**Equipment Needed**

Ex. Rectangle Tables, Round
Tables, Chairs, Sports
Equipment

Event Type

Please check off event type below

Adult Private Function Ex. Professional Workshop	Youth Private Function Ex. Kids Birthday Party	
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**Will this event be advertised
in the community? If so, is
there information you would
like us to give out to the
public? Do you have a poster
for this event?**

**Will you be serving food? (Please note it is
your responsibility to contact AHS.)**

Yes

No

**Will you be requiring parking
and loading/unloading areas?**



Town of
SLAVE LAKE