

FACILITY RENTALS APPLICATION FORM SD41 Employees

Rental Information

Previous invoice # (if renewing)		
Location preferred	Alternate location(s)	
Areas required (gym, classroom, etc)		
Start & end date of event(s)	Reoccurring? (daily, wee	kly, monthly)
Start & end time(s) (including set up & take of	down)	
Name of primary contact	Job title	
Location employed	Phone number(s)	
Email address(es)	Event description	
Additional Information		
# of participants Parking require	ed? \Box Yes \Box No Name of onsite contact _	
Table and/or chair set up required? Yes, # of tables/chairs		□ No
A/V equipment? \Box Yes, please specify (mics	, projectors, etc)	□ No
Serving food and/or beverages? Yes, provide details		🗆 No
Catering? Yes, name of caterer	□ No	
Will alcohol be served? \Box Yes, contact Facili	ty Rentals 🛛 No	
Will fees, membership or admission be charged? Yes, provide details		No
Custodial Information		
Custodian(s) required? Ves, please see be	low 🗆 No	
How many? Start time	End time GL Code	

Please save a copy of this form and email it to <u>Facility.Rentals@burnabyschools.ca</u> a minimum of 10 business days in advance. To avoid delay in processing please ensure all fields are complete. More information can be found on the Facility Rentals website: <u>https://burnabyschools.ca/facilityrentals/staff/</u>