

Date submitted: _____

CONTACT INFORMATION

Name of Organization/Group: _____ Primary Contact/ Position: _____

Address: _____ City: _____ Postal Code: _____

Phone: _____ Cell: _____ E-mail Address: _____

LIABILITY INSURANCE (\$2 MILLION)

Org/Group will provide own insurance Org/Group wishes SD41 to collect and remit funds to cover insurance to All-Sport Insurance

TYPE OF ORGANIZATION/GROUP

Non-Profit Society, Registration #: _____ Adult Burnaby Residents
 Commercial Youth (under 19)

BOOKING INFORMATION

Date of event/booking: _____ Number of participants: _____

Will fees, membership or admission be charged? Yes No If yes, how much per session? _____

Description of use/activity: _____

Parking Requirements: _____ On site leader/contact: _____

School/site requested: (1) _____ (2) _____

Areas required (ie. gym, classroom, etc.) _____

Start time (includes set up): _____ End time (includes take down): _____

Table and chair set up? Yes No If yes, provide details: _____

A/V equipment? (mics, projectors...): _____

Serving food/beverage? Yes No If yes, provide details: _____

Catering? Yes No If yes, provide name of caterers: _____

Will alcohol be served? Yes No If yes, contact rentals (604-296-6904) for additional information.

NOTE: Serving of any alcoholic beverages must be applied for in writing to the Secretary Treasurer, c/o School District #41 (Burnaby), 5325 Kincaid Street, Burnaby, BC V5G 1W2

For office use only:

- Invoice # _____
- Contract signed
- Copy of insurance attached