## **Recreation Services**

3310 37<sup>th</sup> Avenue, Vernon, B.C. V1T 2Y5 250-550-3257 Fax: 250-550-3705

Return completed form to: bookings@vernon.ca

## **Facility Booking Request Form**

Organizat				Event Name:									
Type of Activity:  Address:  Email:							Contact: City & Postal Code:						
							Bus. Phone:					Home Ph	
Alternate Contact:				Phone:									
Area Re	eques	ted											
	Creekside Conference							Sunset Room		Su	Sunrise Room		
Centre Main Floor Only					_			Curling Rink		Wi	Willow Room		
Kitchen								Do	Oogwood Gym		Otl	her	
Dates R	eque	sted	1										
Start Date:									Start Time:				
End Date:							En	End Time:					
Attendance:													
Addition	al Eg	uipr	nent/]	Reg	uests/ <b>l</b> r	ıformatio	n						
Chairs How many	Chairs Tab		5'round 8'rectangle		Risers	Serving Alcohol*	Vendors		orded lusic			Charging admission	
	*we ı	requi	re a cop	y of l	 Liquor Lice	ense							
Additiona	l Note	s: ie.	Project	or ne	eded. floo	or dropped, s	special set 1	ın ins	struction	15			
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		nce in t	the amour	nt of \$		equired for all bo	-	eeds to	list the fo	-	aional Dist	iot of North Oleans	
City of Vernon 3400 30th Street Vernon, B.C. V1T 5E6					District of Coldstream 9901 Kalamalka Road Coldstream, B.C. V1B 1L6				Regional District of North Okanagan 9848 Aberdeen Road Coldstream, B.C. V1B 2K9				
Office Use:	Rece	eived	<b>.</b>						С	ontract: _			