Recreation Services

 $\begin{array}{lll} 3445-43^{rd} \ Avenue, \ Vernon, \ BC & V1T \ 8P5 \\ 250-550-3257 & Fax: \ 250-542-5708 \end{array}$

Return completed form to: bookings@vernon.ca





Facility Booking Request Form

Organization: Type of Activity: Address:			Event Name: Contact: City & Postal Code:								
						Email:					
						Bus. Phone:		Home Phone:		Cell Phone:	
Alternate Contact:		Phone:									
Area Requeste	d : Please use s	eparate form for each	ı facility.								
Kal Tire Place: Ice Surface Dry Floor Concourse Overtime Room Training Room		Tire Place North: Ice Surface Dry Floor Civic Room Crossover Room Breakaway Room Parking Lot, north	Priest Valley Arena Ice Surface Dry Floor Off Ice Room Priest Valley Gym		Centennial Outdoor Arena Ice Surface Dry Floor						
Dates Reques	ted:										
Date:			Start Time:		End Time:						
Date:			Start Time:		End Time:						
Date:			Start Time:		End Time:						
More than 1 Tables: Charging add Adults: woul Holding a rai Food/bevera	dressing room p Chairs: mission d like to see alco ffle or draw; cop age quote or con		be submitted befo								
Comments:											
No outside food or di	ink allowed. Ple	ase request a quote if re	equired. No helium	balloons or co	onfetti allowed inside the building.						
Signature:			Date:								
Office Use: Receiv	ved:			Contra	act:						