

20 **Event Request Form**

EVENT NAME: \_\_\_\_\_

CONTACT PERSON/NUMBER: \_\_\_\_\_

DATES OF EVENT:

January \_\_\_\_\_

February \_\_\_\_\_

March \_\_\_\_\_

April \_\_\_\_\_

May \_\_\_\_\_

June \_\_\_\_\_

July \_\_\_\_\_

August \_\_\_\_\_

September \_\_\_\_\_

October \_\_\_\_\_

November \_\_\_\_\_

December \_\_\_\_\_

EVENT TIME: \_\_\_\_\_

EVENT FEES, if applicable: \_\_\_\_\_

Any other information you need to provide:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the Board of Directors approved your event?      YES              NO

Please return completed form to Lori Buzzelli

If you hold more than one event, i.e. winter/summer/indoor/outdoor, you **MUST** complete a separate form or make certain that details are specific and comprehensible.